

Application #

* Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license.

Harnett County Central Permitting
420 McKinney Pkwy Lillington, NC 27546
PO Box 65 Lillington, NC 27546
910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits

Application for Residential Building and Trades Permit

Owner's Name: Bernardo Twyne		Date _		
Site Address: 429 Angel Oak Dr Bunnlevel, NC 28323				
Subdivision: FOREST OAKS PH 5 SEC 1				
Description of Proposed Work: PV Solar Install/ Size: 4.4 KW D				
General Contractor Information				
Encor Solar LLC / Leslie Scott Robinson	(704) 318-28	358		
Building Contractor's Company Name	Telephone			
3049 Executive Parkway, Suite 300, Lehi UT 84043	permits@enco	rsolar	.com	
Address	Email Address			
L.99580 HEATED SQ FT GARAGE SQ) FT			
License #				
Description of Work PV Solar Install/ Size: 4.4 KW DC Service Size:	<u>1</u> 200 Amns T-F	ole.	Yes N	in
Joshua Collins	(801) 544-59		_1031	U
Electrical Contractor's Company Name	Telephone	U-T		
3049 Executive Parkway, Suite 300, Lehi UT 84043	permits@enco	rsolar.	com	
Address	Email Address			
U.35743				
License #				
Mechanical/HVAC Contractor Inform	<u>ation</u>			
Description of Work		_		
Mechanical Contractor's Company Name	Telephone			
Address	Email Address			
License #				
Plumbing Contractor Information	n			
Description of Work	_ _# Baths			
Description of Work			_	
Plumbing Contractor's Company Name	Telephone			
γ				
Address	Email Address			
License #				
Insulation Contractor Information	<u>n</u>			
Insulation Contractor's Company Name & Address	Telephone		_	_
Insulation Contractor's Company Name & Address	relephone			

*NOTE: General Contractor / owner must fill out and sign the second page of this application.



I hereby certify that I have the authority to make necessary application, that the application is correct and that the construction will conform to the regulations in the Building, Electrical, Plumbing and Mechanical codes, and the Harnett County Zoning Ordinance. I state the information on the above contractors is correct as known to me and that by-signing-below-I have obtained all subcontractors-permission to obtain these permits and if any changes occur including listed contractors, site plan, number of bedrooms, building and trade plans, Environmental Health permit changes or proposed use changes, I certify it is my responsibility to notify the Harnett County Central Permitting Department of any and all changes.

EXPIRED PERMIT FEES - 6 Months to 2 years permit re-issue fee is \$150.00. After 2 years re-issue fee is as per current fee schedule.

07/00/0000

Joshua Collins	07/20/2023
Signature of Owner/Contractor/Officer(s) of Corporation	Date
Affidavit for Worker's Compe	ensation N.C.G.S. 87-14
The undersigned applicant being the:	
X General Contractor OwnerX C	officer/Agent of the Contractor or Owner
Do hereby confirm under penalties of perjury that the perso set forth in the permit:	n(s), firm(s) or corporation(s) performing the work
X Has three (3) or more employees and has obtained	workers' compensation insurance to cover them.
$\underline{\hspace{1cm}}$ Has one (1) or more subcontractors(s) and has obta them.	ined workers' compensation insurance to cover
Has one (1) or more subcontractors(s) who has their covering themselves.	own policy of workers' compensation insurance
Has no more than two (2) employees and no subcon	tractors.
While working on the project for which this permit is sought Department issuing the permit may require certificates of co to issuance of the permit and at any time during the permit carrying out the work.	overage of worker's compensation insurance prior
Sign w/Title: Joshua Collins	

Central Permitting



Initial Application Date: 07/20/2023 Application # ___

					CU#	
ral Permitting 420 McKinne	COUNTY OF HARNE ey Pkwy, Lillington, NC 275	TT RESIDENTIAL LAND (46 Phone: (910) 893-	· · · · · · · · · ·		893-2793	www.harnett.org/permits
A RECORDED SURVEY MAP, REC	CORDED DEED (OR OFFER TO) PURCHASE) & SITE PLAN A	RE REQUIRED	WHEN SUBMI	TTING A LAN	ID USE APPLICATION
NER: Bernardo Twyne		Mailing Address:_	429 Angel	l Oak Dr		
nnlevel	State:_NC _ Zip:_2832	.3 Contact No: (470)	242-9481	Email:	Btwyne2	1@gmail.com
NT*: Leyla Boshard	Mailing	Address: 3049 Execu	utive Parl	kway, Su	ite 300	
hi	State:UTZip:840	43 Contact No: (704)	318-2858	Email:	permits	@encorsolar.com
out applicant information if different	than landowner					
S: 429 Angel Oak Dr	Bunnlevel, NC	28323 PIN: 0506	5-97-7494.	000		
Flood:	Watershed:	Deed Book / Page:				
– Front:Back:	Side: Cor	ner:				
SED USE:						
			_			Monolithic

LANDOWNER: Bernardo Twyne		Mailing Address:	429 Angel Oak	Dr	
City: Bunnlevel	_State: NC _Zip: 28323	3 Contact No: (470)) 242-9481 _{Emai}	il: Btwyne21@gmail.	. com
APPLICANT*: Leyla Boshard	Mailing <i>F</i>	Address: 3049 Exec	utive Parkway,	Suite 300	
City: Lehi	_ State:UTZip:8404	3 Contact No:(704) 318-2858 _{Emai}	_{il:} permits@encors	olar.com
*Please fill out applicant information if different the		28222 050	C 07 7404 000		
ADDRESS: 429 Angel Oak Dr					
Zoning: Flood:	Watershed:I	Deed Book / Page:			
Setbacks – Front: Back:	Side: Corne	er:			
PROPOSED USE: ☐ SFD: (Sizex) # Bedroon TOTAL HTD SQ FTGARAGE SQ F			-		
☐ Modular: (Sizex) # Bedr TOTAL HTD SQ FT ☐ Manufactured Home:SWD	(Is the second floor fir	nished? () yes ()	no Any other site built	t additions? () yes ()	no
☐ Duplex: (Sizex) No. Buil	ldings: N	o. Bedrooms Per Unit:_		TOTAL HTD SQ FT	
☐ Home Occupation: # Rooms:	Use:	Hours of 0	Operation:	#Employ	ees:
Addition/Accessory/Other: (Size		dential PV Sola	r Install	Closets in addition? () yes () no
Water Supply: <u>X</u> County Exis Sewage Supply: New Septic Tank _ (Complete Environmental	(Need to Expansion Relo	Complete New Well ApcationExisting Sepside of application if Sep	oplication at the same tile otic Tank <u>X</u> County otic)	<mark>me as New Tank</mark>) Sewer	
Does owner of this tract of land, own land	that contains a manufactur	red home within five hu	ndred feet (500') of tract	t listed above? () yes () no
Does the property contain any easements	whether underground or o	verhead () yes (_2	<u>(</u>) no		
Structures (existing or proposed): Single fa	amily dwellings:	Manufactured	Homes:	Other (specify):	
If permits are granted I agree to conform t I hereby state that foregoing statements a		the best of my knowled		vocation if false information	

Signature of Owner or Owner's Agent

Date

It is the owner/applicants responsibility to provide the county with any applicable information about the subject property, including but not limited to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not responsible for any incorrect or missing information that is contained within these applications.

*This application expires 6 months from the initial date if permits have not been issued**

APPLICATION CONTINUES ON BACK

strong roots · new growth



This application expires 6 months from the initial date if permits have not been issued

This application to be filled out when applying for a septic system inspection.

County Health Department Application for Improvement Permit and/or Authorization to Construct

IF THE INFORMATION IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT PERMIT

OR AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration depending upon documentation submitted. (Complete site plan = 60 months; Complete plat = without expiration)

☐ Environmental Health New Septic System

- <u>All property irons must be made visible</u>. Place "pink property flags" on each corner iron of lot. All property lines must be clearly flagged approximately every 50 feet between corners.
- Place "orange house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks, out buildings, swimming pools, etc. Place flags per site plan developed at/for Central Permitting.
- Place orange Environmental Health card in location that is easily viewed from road to assist in locating property.
- If property is thickly wooded, Environmental Health requires that you clean out the <u>undergrowth</u> to allow the soil evaluation to be performed. Inspectors should be able to walk freely around site. **Do not grade property**.
- All lots to be addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred for failure to uncover outlet lid, mark house corners and property lines, etc. once lot confirmed ready.

Environmental Health Existing Tank Inspections

- Follow above instructions for placing flags and card on property.
- Prepare for inspection by removing soil over **outlet end** of tank as diagram indicates, and lift lid straight up (*if possible*) and then **put lid back in place**. (Unless inspection is for a septic tank in a mobile home park)
- DO NOT LEAVE LIDS OFF OF SEPTIC TANK

"MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION"

<u>SEPTIC</u>		
If applying	for authorization	on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.
{}} Acce	epted	{} Innovative {} Conventional {} Any
{}} Alte	rnative	{}} Other
		the local health department upon submittal of this application if any of the following apply to the property in "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION :
{}}YES	{ <u>X</u> } NO	Does the site contain any Jurisdictional Wetlands?
{}}YES	{ X } NO	Do you plan to have an <u>irrigation system</u> now or in the future?
{}}YES	{_ X } NO	Does or will the building contain any drains? Please explain.
{}}YES	{ _X _} NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
{}}YES	{ X } NO	Is any wastewater going to be generated on the site other than domestic sewage?
{}}YES	{ <u>X</u> } NO	Is the site subject to approval by any other Public Agency?
{}}YES	{ X } NO	Are there any Easements or Right of Ways on this property?
{}}YES	{ <u>X</u> } NO	Does the site contain any existing water, cable, phone or underground electric lines?
		If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.

I Have Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And State Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules. I Understand That I Am Solely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making The Site Accessible So That A Complete Site Evaluation Can Be Performed.

Application #

Harnett County Central Permitting

Mailing Address - PO Box 65 Lillington, NC 27546 – Physical Address – 420 McKinney PKWY Lillington NC 27546 Ph.: 910-893-7525 - Fax: 910-893-2793 - www.harnett.org/permits

Certification of Work Performed By Owner/Contractor

(Individual Trade Application)

Owner (s) of Structure: Bernardo Twyne	Phone: (470) 242-9481
Owner (s) Mailing Address: 429 Angel Oak Dr Bunnleve	1, NC 28323
Land Owner Name (s): Bernardo Twyne	Phone: (470) 242-9481
Construction or Site Address: 3049 Executive Parkway,	Suite 300, Lehi UT 84043
PIN #0506-97-7494.000 Parcel #	01-0536-09-0028-23
Job Cost (Required): \$28,106.65 Description of Work to be d	one PV Solar Install/ Size: 4.4 KW DC
(11) HANWHA Q.PEAK DUO BLK ML-G10+ 400 / (11) EN	NPHASE IQ8PLUS-72-2-US INVERTER(S)
Mechanical: New Unit With Ductwork New Unit Without	out Ductwork Gas Piping Other
Electrical*: 200 Amp <200 Amp Service Change * For Progress Energy customers we need the	
Plumbing: Water/Sewer Tap Number of Baths	s Water Heater
Specific Directions to Job from Lillington: Go S on McKinney Pkwy toward Alexander Dr. Take in Bunnlevel. Take Lemuel Black Rd to Angel Oak	
Subdivision: FOREST OAKS PH 5 SEC 1	Lot #: 293
Joshua Collins will provide the PV SOLAR (Contractors Name)	INSTALL labor on this structure.
I am the building owner or my NC state license number is	J. 35743 , which entitles me to
perform such work on the above structure legally. All work s	
other applicable State and local laws, ordinances and regula	ations.
Encor Solar LLC	(704) 318-2858
Contractor's Company Name	Telephone
3049 Executive Parkway, Suite 300, Lehi UT 84043	
Address	Email Address
U.35743 License #	
Structure Owner / Contractor Signature:	<i>Collins</i> Date: 07/20/2023

By signing this application, you affirm that you have obtained permission from the above listed license holder to purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or sell the listed property for 12 months after completion of the listed work.

*Company name, address, & phone must match information on license

Faxed or Mailed application could have an approximately 1-5 day process time

Certificate Of Completion

Envelope Id: BCC802857FFF4B008647507541A19F2C

Subject: Bernardo Twyne: (NC) Harnett County - Permit Application

Source Envelope:

Document Pages: 5 Signatures: 0 Envelope Originator: Initials: 0 Certificate Pages: 1 Docs Team

AutoNav: Enabled

Envelopeld Stamping: Enabled

Time Zone: (UTC-07:00) Mountain Time (US & Canada)

3049 Executive Way Lehi, UT 84043 DAAS@gosolo.io

IP Address: 24.10.231.156

Status: Completed

Record Tracking

Status: Original Holder: Docs Team Location: DocuSign

7/18/2023 12:26:46 PM DAAS@gosolo.io

Signer Events	Signature	Timestamp		
Daas	Completed	Sent: 7/19/2023 12:57:27		

7 PM daas@gosolo.io Viewed: 7/19/2023 12:57:39 PM Team Signed: 7/19/2023 12:57:41 PM Using IP Address: 172.83.4.50

Security Level: Email, Account Authentication

(None)

Solo

Electronic Record and Signature Disclosure:

Not Offered via DocuSign

In Person Signer Events	Signature	Timestamp
Editor Delivery Events	Status	Timestamp
Agent Delivery Events	Status	Timestamp
Intermediary Delivery Events	Status	Timestamp
Certified Delivery Events	Status	Timestamp
Carbon Copy Events	Status	Timestamp
Witness Events	Signature	Timestamp
Notary Events	Signature	Timestamp
Envelope Summary Events	Status	Timestamps
Envelope Sent Certified Delivered Signing Complete Completed	Hashed/Encrypted Security Checked Security Checked Security Checked	7/19/2023 12:57:27 PM 7/19/2023 12:57:39 PM 7/19/2023 12:57:41 PM 7/19/2023 12:57:41 PM
Payment Events	Status	Timestamps