



Application # _____

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

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

Application for Residential Building and Trades Permit

Owner's Name: Laura Zehr Date _____

Site Address: 656 Atkins Rd Fuquay-Varina, NC 27526 Phone (216) 210-1351

Subdivision: JOHN B WELLS JR MP#2013-217 Lot 1

Description of Proposed Work: PV solar install/ Size: 8.4 KW DC Total Job Cost \$49,999.99

General Contractor Information

Encor Solar LLC / Leslie Scott Robinson (704) 318-2858

Building Contractor's Company Name Telephone

3049 Executive Parkway, Suite 300, Lehi UT 84043 permits@encorsolar.com

Address Email Address

L.99580 **HEATED SQ FT** **GARAGE SQ FT**

License #

Electrical Contractor Information

Description of Work PV solar install/ Size: 8.4 KW DC Service Size: 125A Amps T-Pole: Yes No

Joshua Collins (801) 544-5964

Electrical Contractor's Company Name Telephone

3049 Executive Parkway, Suite 300, Lehi UT 84043 permits@encorsolar.com

Address Email Address

U.35743

License #

Mechanical/HVAC Contractor Information

Description of Work _____

Mechanical Contractor's Company Name Telephone

Address Email Address

License #

Plumbing Contractor Information

Description of Work _____ # Baths _____

Plumbing Contractor's Company Name Telephone

Address Email Address

License #

Insulation Contractor Information

Insulation Contractor's Company Name & Address Telephone

***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.

Joshua Collins

07/26/2023

Signature of Owner/Contractor/Officer(s) of Corporation

Date

Affidavit for Worker's Compensation N.C.G.S. 87-14

The undersigned applicant being the:

General Contractor Owner Officer/Agent of the Contractor or Owner

Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:

Has three (3) or more employees and has obtained workers' compensation insurance to cover them.

Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.

Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance covering themselves.

Has no more than two (2) employees and no subcontractors.

While working on the project for which this permit is sought it is understood that the Central Permitting Department issuing the permit may require certificates of coverage of worker's compensation insurance prior to issuance of the permit and at any time during the permitted work from any person, firm or corporation carrying out the work.

Sign w/Title: Joshua Collins Date: 07/26/2023



Initial Application Date: 07/26/2023

Application # _____

CU# _____

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting 420 McKinney Pkwy, Lillington, NC 27546 Phone: (910) 893-7525 ext:1 Fax: (910) 893-2793 www.harnett.org/permits

****A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION****

LANDOWNER: Laura Zehr Mailing Address: 656 Atkins Rd

City: Fuquay-Varina State: NC Zip: 27526 Contact No: (216) 210-1351 Email: mastrucci@gmail.com

APPLICANT*: Leyla Boshard Mailing Address: 3049 Executive Parkway, Suite 300

City: Lehi State: UT Zip: 84043 Contact No: (704) 318-2858 Email: permits@encorsolar.com

*Please fill out applicant information if different than landowner

ADDRESS: 656 Atkins Rd Fuquay-Varina, NC 27526 PIN: 0664-86-0236.000

Zoning: _____ Flood: _____ Watershed: _____ Deed Book / Page: _____

Setbacks – Front: _____ Back: _____ Side: _____ Corner: _____

PROPOSED USE:

SFD: (Size _____ x _____) # Bedrooms: _____ # Baths: _____ Basement(w/wo bath): _____ Garage: _____ Deck: _____ Crawl Space: _____ Slab: _____ Slab: _____ Monolithic
TOTAL HTD SQ FT _____ **GARAGE SQ FT** _____ (Is the bonus room finished? () yes () no w/ a closet? () yes () no (if yes add in with # bedrooms)

Modular: (Size _____ x _____) # Bedrooms _____ # Baths _____ Basement (w/wo bath) _____ Garage: _____ Site Built Deck: _____ On Frame _____ Off Frame _____
TOTAL HTD SQ FT _____ (Is the second floor finished? () yes () no Any other site built additions? () yes () no

Manufactured Home: _____ SW _____ DW _____ TW (Size _____ x _____) # Bedrooms: _____ Garage: _____ (site built? _____) Deck: _____ (site built? _____)

Duplex: (Size _____ x _____) No. Buildings: _____ No. Bedrooms Per Unit: _____ **TOTAL HTD SQ FT** _____

Home Occupation: # Rooms: _____ Use: _____ Hours of Operation: _____ #Employees: _____

Addition/Accessory/Other: (Size _____ x _____) Use: **Residential PV Solar Install** Closets in addition? () yes () no
TOTAL HTD SQ FT _____ **GARAGE** _____

Water Supply: County _____ Existing Well _____ New Well (# of dwellings using well _____) ***Must have operable water before final**
(Need to Complete New Well Application at the same time as New Tank)

Sewage Supply: _____ New Septic Tank _____ Expansion _____ Relocation _____ Existing Septic Tank County Sewer
(Complete Environmental Health Checklist on other side of application if Septic)

Does owner of this tract of land, own land that contains a manufactured home within five hundred feet (500') of tract listed above? () yes () no

Does the property contain any easements whether underground or overhead () yes () no

Structures (existing or proposed): Single family dwellings: _____ Manufactured Homes: _____ Other (specify): _____

If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

Leyla Boshard
Signature of Owner or Owner's Agent

07/26/2023
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



****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

- **All property irons must be made visible.** 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 **undergrowth** 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"

SEPTIC

If applying for authorization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.

{ } Accepted { } Innovative { } Conventional { } Any
 { } Alternative { } Other _____

The applicant shall notify the local health department upon submittal of this application if any of the following apply to the property in question. If the answer is "yes", applicant **MUST ATTACH SUPPORTING DOCUMENTATION**:

- { } YES { **X** } NO Does the site contain any Jurisdictional Wetlands?
- { } YES { **X** } NO Do you plan to have an irrigation system 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 { **X** } 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 { **X** } 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.

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: Laura Zehr Phone: (216) 210-1351

Owner (s) Mailing Address: 656 Atkins Rd Fuquay-Varina, NC 27526

Land Owner Name (s): Laura Zehr Phone: (216) 210-1351

Construction or Site Address: 3049 Executive Parkway, Suite 300, Lehi UT 84043

PIN # 0664-86-0236.000 Parcel # 040664 0020 05

Job Cost (Required): \$49,999.99 Description of Work to be done PV Solar Install/ Size: 8.4 KW DC
(21) HANWHA Q.PEAK DUO BLK ML-G10+ 400 / (21) ENPHASE IQ8PLUS-72-2-US INVERTER(S)

Mechanical: New Unit With Ductwork New Unit Without Ductwork Gas Piping Other

Electrical*: 200 Amp <200 Amp Service Change Service Reconnect Other

* For Progress Energy customers we need the premise number

Plumbing: Water/Sewer Tap Number of Baths Water Heater

Specific Directions to Job from Lillington:

Go N on McKinney Pkwy. Turn L on US-401 N. Turn R on Chalybeate Springs Rd. Turn L on Atkins Rd.

Subdivision: JOHN B WELLS JR MP#2013-217 Lot #: 1

I Joshua Collins will provide the PV SOLAR INSTALL labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is U.35743, which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations.

Encor Solar LLC
Contractor's Company Name
3049 Executive Parkway, Suite 300, Lehi UT 84043
Address
U.35743
License #

(704) 318-2858
Telephone
permits@encorsolar.com
Email Address

Structure Owner / Contractor Signature: Joshua Collins Date: 07/26/2023

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: 37CE549097C04133A66C09124AE41343	Status: Completed
Subject: Laura Zehr: (NC) Harnett County - Permit Application	
Source Envelope:	
Document Pages: 5	Signatures: 0
Certificate Pages: 1	Initials: 0
AutoNav: Enabled	Envelope Originator:
Envelopeld Stamping: Enabled	Docs Team
Time Zone: (UTC-07:00) Mountain Time (US & Canada)	3049 Executive Way
	Lehi, UT 84043
	DAAS@gosolo.io
	IP Address: 24.10.231.156

Record Tracking

Status: Original	Holder: Docs Team	Location: DocuSign
7/12/2023 10:29:14 AM	DAAS@gosolo.io	

Signer Events

Signature	Timestamp
Daas	Sent: 7/25/2023 8:42:47 PM
daas@gosolo.io	Viewed: 7/25/2023 8:43:02 PM
Team	Signed: 7/25/2023 8:43:05 PM
Solo	
Security Level: Email, Account Authentication (None)	
Using IP Address: 172.83.4.50	

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	Hashed/Encrypted	7/25/2023 8:42:47 PM
Certified Delivered	Security Checked	7/25/2023 8:43:02 PM
Signing Complete	Security Checked	7/25/2023 8:43:05 PM
Completed	Security Checked	7/25/2023 8:43:05 PM

Payment Events

Status

Timestamps