



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: Miguel Cruz Date _____
Site Address: 669 Juno Dr Broadway NC 27505 Phone (347) 985-3289
Subdivision: TINGEN POINTE PH 6 Lot 175
Description of Proposed Work: PV solar Install/ Size: 5.6 KW DC Total Job Cost \$54,696.18

General Contractor Information

Encor Solar LLC (801) 992-1635
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: 5.6 KW DC Service Size: 200 Amps T-Pole: ___ Yes ___ No
Leslie Scott Robinson - Encor Solar LLC (409) 363-4017
Electrical Contractor's Company Name Telephone
3049 Executive Parkway, Suite 300, Lehi UT 84043 permits@encorsolar.com
Address Email Address
U.35648
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.

DocuSigned by:

11/14/2023

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.

DocuSigned by:

11/16/2023

Sign w/Title: _____

Date: _____



Initial Application Date: _____

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: Miguel Cruz Mailing Address: 669 Juno Dr

City: Broadway State: NC Zip: 27505 Contact No: (347) 985-3289 Email: cruzcarinomiguel@gmail.com

APPLICANT*: Leslie Scott Robinson Mailing Address: 3049 Executive Parkway, Suite 300

City: Lehi State: UT Zip: 84043 Contact No: (910) 284-1183 Email: permits@encorsolar.com

*Please fill out applicant information if different than landowner

ADDRESS: 669 Juno Dr Broadway NC 27505 PIN: 9597-32-6734.000

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

Setbacks - Front: _____ Back: _____ Side: _____ Corner: _____

PROPOSED USE:

Monolithic
SFD: (Size x) # Bedrooms: # Baths: Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: Slab:
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: Roof Mount Solar Panels 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.

Miguel Cruz
Signature of Owner or Owner's Agent

11/16/2023
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

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: Miguel Cruz Phone: (347) 985-3289

Owner (s) Mailing Address: 669 Juno Dr Broadway NC 27505

Land Owner Name (s): Miguel Cruz Phone: (347) 985-3289

Construction or Site Address: 669 Juno Dr Broadway NC 27505

PIN # 9597-32-6734.000 Parcel # 9597-32-6734.000

Job Cost (Required): \$54,696.18 Description of Work to be done PV Solar Install/ Size: 5.6 KW DC
(14) HANWHA Q.PEAK DUO BLK ML-G10+ 400 / (14) 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 S on McKinney Pkwy toward Alexander Dr. Take NC-210 S, Darroch Rd and NC-27 W to Omaha Dr. Follow Omaha Dr to Juno Dr.

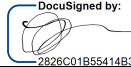
Subdivision: TINGEN POINTE PH 6 Lot #: 175

I Leslie Scott Robinson 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 L.99580, 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
Address
L.99580
License #

(910) 284-1183
Telephone
permits@encorsolar.com
Email Address

Structure Owner / Contractor Signature:  Date: 11/14/2023

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: 6D93765A4E704BF29AC19F83099447A6	Status: Completed
Subject: Miguel Cruz: (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 Parkway
	Lehi, UT 84043
	DAAS@gosolo.io
	IP Address: 24.10.231.156

Record Tracking

Status: Original	Holder: Docs Team	Location: DocuSign
11/10/2023 10:51:12 AM	DAAS@gosolo.io	

Signer Events

Signature	Timestamp
Completed	Sent: 11/13/2023 8:17:32 AM
	Viewed: 11/13/2023 8:23:31 AM
	Signed: 11/13/2023 8:23:46 AM
Using IP Address: 172.83.4.50	

Daas
daas@gosolo.io
Team
Solo
Security Level: Email, Account Authentication (None)

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	11/13/2023 8:17:32 AM
Certified Delivered	Security Checked	11/13/2023 8:23:31 AM
Signing Complete	Security Checked	11/13/2023 8:23:46 AM
Completed	Security Checked	11/13/2023 8:23:46 AM

Payment Events**Status****Timestamps**