

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: Micahel Hill		Date 11.07.2024
Site Address: 1371 Cane Mill Road, Coats, NC, 27521	Phone	9106580631
Subdivision:  Description of Proposed Work:	Total Job Cost	3,500.00
General Contractor Information	_	
Top Tier Solar Solutions LLC/Michael Whitson		
Building Contractor's Company Name	Telephone	
1530 Center Park Dr. Charlotte NC 28217	NC@toptiersolarsolutions.com	
Address	Email Address	
87345 HEATED SQ FT GARAGE SQ	FT	
License #		
Description of Work replacing 2 existing main service panels with 2 new Service Size: 2	<u>l</u> <sup>00</sup> Amps T-Pe	ole: Yes <sup>x</sup> No
Top Tier Solar Solutions LLC/Michael Whitson	855-997-1213	
Electrical Contractor's Company Name	Telephone	
1530 Center Park Dr. Charlotte NC 28217	NC@toptiersolarsolutions.com	
Address	Email Address	
U.35673 **replacing 2 existing main service panels with 2 r an risers**	new 200amp main s	service panels with new feeder
License #		
Mechanical/HVAC Contractor Informa		
Description of Work		
Marta di al Ocata da la Ocaza de Nova	<del></del>	
Mechanical Contractor's Company Name	Telephone	
Address	Email Address	
Audiess	Email Address	
License #		
Plumbing Contractor Information	<u>1</u>	
Description of Work	# Baths	
Plumbing Contractor's Company Name	Telephone	
Address	Email Address	
License #		
Insulation Contractor Information	<u>1</u>	
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.		
Signature of Owner/Contractor/Officer(s) of Corporation  11.07.2024  Date		
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:		
X 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:		
X 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: chief operating officer		