CentralPermitting@Harnett.org
(910) 893-7525 ext:1
420 McKinney Pkwy (physical)
PO Box 65 (mailing)
Lillington, NC 27546

INDIVIDUAL TRADE APPLICATION

CONSTRUCTION TYPE: Residential ☒ Non-Residential ☐

SITE ADDRESS: 96 Atkins Village Ct, Fuquay Varina, NC 27526 **PIN**: _____

LANDOWNER: Heriberta Calva Mailing Address: 96 Atkins Village Ct

City: Fuquay Varina State: NC Zip: 27526 Phone: (919) 793-7010 Email: Hery.calva2014@gmail.com

JOB COST (required): $11,736

DESCRIPTION OF WORK: HVAC Mechanical Change Out

Mechanical: New Unit With Ductwork ☒ New Unit Without Ductwork ☐ Gas Piping ☐ Other _____

Electrical: 200 Amp ☐ Greater than 200 Amp ☐ Service Change ☐ Service Reconnect ☒ Other _____

Plumbing: Water Tap/Sewer Connection ☐ Water Heater ☐ Number of Fixtures ____ Other _____

CONTRACTOR INFORMATION

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

Solix Heating & Air LLC
Contractor's Company Name

(919)586-4341
Phone

164 Barewood Dr, Four Oaks, NC 27524
Address

Marcos@solixhvac.com
Email

37635
License #

Mechanical change outs & generator applications require both electrical & mechanical information. If applicable:

AOS Power Solutions LLC
Contractor's Company Name

(919) 633-7158
Phone

3260 Lynn Ridge Dr, Raleigh, NC 27613
Address

aospowersolutions@gmail.com
Email

37055
License #

I am the building owner or NC state licensed contractor, which legally entitles me to perform such work on the above structure. I attest that all work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations. **By signing this application, I affirm that I have obtained permission from the above listed license holder to purchase permits on their behalf.** If doing the work as owner, I understand that I cannot rent, lease, or sell the listed property for 12 months after completion of the listed work.

MARCOS DELAHOYA
Signature of Owner/Contractor

9/22/25
Date