

Application # BRES1907-0018

\* Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match information on license. Harnett County Central Permitting PO Box 65 Lillington, NC 27546 910-893-7525 Fax 910-893-2793 www.harnett.org/permits

## **Application for Residential Building and Trades Permit**

on on license.	
Owner's Name: Sahring Granelli	Date: 7/25/19
Site Address: 16 Spring Flowers Dr	Clywron Phone: 781 888 1830
Subdivision: Caldina Season	Lot:X.13
Description of Proposed Work: Worke ground	pool
General Contractor In	formation
Make tool Service	910.488-4494
Building Contractor's Company Name	Telephone
1304 Duncan SI toughtall	te into a make pool service. com
Address	Email Address
License #	
Electrical Contractor Ir	nformation vice Size: Amps T-Pole:Yes MNo
Description of Work DOO OUTLET Serv	rice Size: U Amps T-Pole: LI Yes KI No
J. Stoward Electrical Co, Inc.	919 774 1650
Electrical Contractor's Company Name	relepnone
2514 Dogwood St Santord	Drin. showard@ whatere
Address	Email Address
15'193-L	
License #	
Mechanical/HVAC Contract	tor Information
Description of Work	
Mechanical Contractor's Company Name	Telephone
Address	Email Address
License #	
Plumbing Contractor I	nformation
Description of Work	# Baths
Plumbing Contractor's Company Name	Telephone
*	
Address	Email Address
License #	
Insulation Contractor I	nformation
Insulation Contractor's Company Name & Address	Telephone

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