

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: 32 Country Spring Lans	PIN:
LANDOWNER: Stanley + Debra Lovren Mailing Address: PO Box 294	
City: ERWIN State: NC Zip: 28339 Phone: 919461-2010 Email: debbielo vren@gmail-com	
JOB COST (required): 2000 00	
VDESCRIPTION OF WORK: WIRTING SHED 14136	
Mechanical: New Unit With Ductwork □ New Unit Without Ductwork	rork Gas Piping Other
Electrical: 200 Amp ☑ Greater than 200 Amp □ Service Cha	inge □ 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.	
Stanley Lorren	919-467-2010
Contractor's Company Name PO Box 294 Erwin NC 28339	Phone debbie pyven@gmail. Lom
Address	Email
License #	
Mechanical change outs & generator applications require both electrical & mechanical information. If applicable:	
mechanical change outs & generator applications require both electrical & mechanical information. If applicable.	
Contractor's Company Name	Phone
Address	Email
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. Laffirm 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.	
TOWN COM	9/3/25
Signature of Owner/Contractor	Date