



Application # \_\_\_\_\_

Harnett County Central Permitting  
PO Box 65 Lillington, NC 27546  
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

\* Each section below to be filled out  
by whomever performing work.  
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: Christopher Santana Date: 5/18/15  
Site Address: 6019 Tripp Rd. Lillington NC 27546 Phone: 203-907-9326  
Subdivision: \_\_\_\_\_ Lot: \_\_\_\_\_  
Description of Proposed Work: Build Garage Total Job Cost: 20,157.66

**General Contractor Information**

Ultimate Metal Structures 866-560-8717  
Building Contractor's Company Name Telephone  
114 Shenandoah drive Winston Salem info@ultimatemetalstructure.com  
Address NC 27103 Email Address  
HEATED SQ FT \_\_\_\_\_ GARAGE SQ FT \_\_\_\_\_

License # \_\_\_\_\_

**Electrical Contractor Information**Description of Work \_\_\_\_\_ Service Size: \_\_\_\_\_ Amps T-Pole: ☐ Yes ☐ No

Electrical Contractor's Company Name \_\_\_\_\_

Telephone \_\_\_\_\_

Address \_\_\_\_\_

Email Address \_\_\_\_\_

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 &amp; Address \_\_\_\_\_

Telephone \_\_\_\_\_

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