Application # 11 500 26 405

Harnett County Central Permitting
PO Box 65 Lillington NC 27546 910 893 7525 Fax 910 893 2793 www harnett org/permits Certification of Work Performed By Owner/Contractor (Individual Trade Application)

Owner (s) of Structure MICHAEL + PATRICIA GRIS Owner (s) Mailing Address 1/2 NATCHEZ DR	SOM Phone 211-875-4852 RAEFORD, NC 28376
Land Owner Name (s)	Phone
Construction or Site Address	
PIN # Parcel # _	
Job CostDescription of Work to be done	
Mechanical New Unit With Ductwork New Unit With	out Ductwork Gas Piping Other
Electrical* 200 Amp <200 Amp Service Change   * For Progress Energy customers we need the	e Service Reconnect Other e premise number
Plumbing Water/Sewer Tap Number of Bath	S Water Heater
Specific Directions to Job from Lillington	
Subdivision	Lot #
I A5 WOW will provide the Plus (Contractors Name)	labor on this structure (Trade)
I am the building owner or my NC state license number is _	A4 Musuc which entitles me to
perform such work on the above structure legally All work	shall comply with the State Building Code and all
other applicable State and local laws ordinances and regula	
Contractor's Company Name	Telephone
Address	Email Address
License #	
Structure Owner / Contractor Signature Mchael	Johnson Date 04/20/20L
By signing this application you affirm that you have obtained purchase permits on their behalf. If doing the work as owne the listed property for 12 months after completion of the listed	r you understand that you cannot rent lease or sell

\*Company name, address, & phone must match information on license