

11 | SCANNED
23 | 09
DATE

Application # 09-500-21877

Harnett County Central Permitting

PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793

www.harnett.org/permits

NOV 23 2009

**Certification of Work Performed By Owner/Contractor
(Individual Trade Application)**

Owner (s) of Structure: Richard Gary Phone: 919-499-515

Owner (s) Mailing Address: 14 Boulder Dr. Sanford, NC 27332

Land Owner Name (s): Same Phone: _____

Construction or Site Address: _____

PIN or Parcel # from GIS: 9586 -98 - 5808.000

Job Cost: 2,000.00 Description of Work to be done Electrical wiring on in-ground swimming pool

Mechanical: New Unit With Ductwork ___ New Unit Without Ductwork ___ Gas Piping ___

Electrical*: 200 Amp ___ <200 Amp ___ Service Change ___ Service Reconnect ___ Other Pool
* For Progress Energy customers we need the premise number

Plumbing: Water/Sewer Tap ___ Number of Baths ___ Water Heater ___

Specific Directions to Job from Lillington:

Subdivision: _____ Lot #: _____

I YARD & LIGHTSCAPES INC. will provide the Electrical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 27143-L, 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 regulations.

Structure owner(s) signature: _____ Date: _____

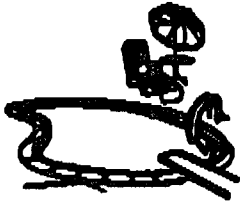
Company Name: YARD & LIGHTSCAPES INC. Phone: 910-514-0120

Address: 1875 Bud Hawkins

County: Harnett Contractor's License #: 27143-L

Contractor's Signature: [Signature] Date: 11-23-09

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



CHAPMAN-WILSON

POOLS, SPAS & HOME IMPROVEMENTS, INC.

606 HOPE MILLS ROAD

FAYETTEVILLE, NORTH CAROLINA 28304

"YOUR SATISFACTION IS OUR #1 PRIORITY"

(910) 424-4663 / 424-0192 OR 1-800-533-0225

FAX: (910) 424-6574

www.chapmanwilson.com



November 23, 2009

To Whom It May Concern:

Chapman Wilson Pools, Spas & Home Improvements Inc. is changing from Bobbie Bright of D&W Mechanical to Matthew Whipple of Yard and Lightscapes as our electrician on our job at 14 Boulder Drive, Sanford, NC 27332.

Thank You,

Angie Hett
Office Manager

Harnett County Central Permitting

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**Certification of Work Performed By Owner/Contractor
(Individual Trade Application)**

Owner (s) of Structure: Richard Gary Phone: 919-499-5115

Owner (s) Mailing Address: 14 Boulder Dr. Sanford N.C.
27332

Land Owner Name (s): Same Phone: _____

Construction or Site Address: _____

PIN or Parcel # from GIS: 9586 - 98 - 5808.000

Job Cost: \$2,000.00 Description of Work to be done E lot for in land Pad

Mechanical: New Unit With Ductwork ___ New Unit Without Ductwork ___ Gas Piping ___

Electrical*: 200 Amp ___ <200 Amp ___ Service Change ___ Service Reconnect ___ Other ___
* For Progress Energy customers we need the premise number

Plumbing: Water/Sewer Tap ___ Number of Baths ___ Water Heater ___

Specific Directions to Job from Lillington:

Subdivision: _____ Lot #: _____

I DTW Mechanical will provide the Electrical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 14245 L, 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 regulations.

Structure owner(s) signature: _____ Date: _____

Company Name: DTW Mechanical Phone: 309-9616

Address: PO Box 509 Hope Mills 28348

County: _____ Contractor's License #: 14245 L

Contractor's Signature: Thomas J. Tate Date: 11/9/09

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