Application #	40012

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

	V	M Slottly Phone:
Owner (s) N	Mailing Address:	
Land Owner	r Name (s):	Phone:
Construction	n or Site Address:	
PIN #		Parcel #
Job Cost (R	lequired):Descrip	ption of Work to be done
Mechanical:	New Unit With Ductwork	New Unit Without Ductwork Gas Piping Other
Electrical*:	200 Amp <200 Amp _ * For Progress Energy cut	Service Change Service Reconnect Other stomers we need the premise number
Plumbing:	Water/Sewer Tap	Number of Baths Water Heater
Specific Dire	ctions to Job from Lillington	ı:
Subdivision:		Lot #:
I	will provid	de the labor on this structure.
(Con	will proviontractors Name)	(Trace)
am the build	ling owner or my NC state li	icense number is to the first which entitles me to
perform such	work on the above structure	re legally. All work shall comply with the State Building Code and a
other applicat	ble State and local laws, ord	dinances and regulations.
Contractor's C	Company Name	Telephone
Address License #	well	Email Address
	ner / Contractor Signature: _	M. Alby Date: 10/001/6
ourcnase pern	s application you affirm that mits on their behalf. If doing perty for 12 months after con	t you have obtained permission from the above listed license holders the work as owner you understand that you cannot rent, lease or smalleting of the listed work.

*Company name, address, & phone must match information on license Faxed or Mailed application could have an approximately 1-5 day process time

Property PARCEL I Applicat Subdivis	y Address NUMBER tion type do sion Name	escription	2pm available no 16-50040012 529 ASHEFORD WA 09-9575-04(CP NEW STORAGE ASHEFORD 149LOT RES/AGRI DIST -	Date AY D18535- BLDG RESIDENTI	11/10/16
Owner			Contract	cor	
	KEVIN M &	LEAH NC 28326	OWNER		
Applican	.t				
SLATTERY 529 ASHE CAMERON (850) 80 Structur Flood Zo	FORD WAY 3-3102 e Informati ne	FI PI SI	12X16 STORAGE B LOOD ZONE X ROPOSED USE EPTIC - EXISTING ATER SUPPLY	STOR! ? EXT 1	
Additional Phone According Date	al desc	1166701 11/10/16	AL BUILDING PERMI	ion	(
Additional Phone According Issue Date Expiration	al desc cess Code . ce on Date	LAND USE F 1166719 11/10/16 5/09/17	PERMIT Valuati	on	0
Special N T/S: 10/	otes and Co 25/2016 03 FORD WAY OF	omments :41 PM JB F OF MARKS	ROCK RD		

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

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LIJ I I I NOTO	-
For Inspections Call: (910) 893-7525 Fax: (910) 893-2793 Bldg Insp scheduled before 2pm available next business	
Bldg Insp scheduled before 2pm available next business day. Application Numbers	
2pm available next business	
Application Number	
Application Number Property Address 16-50040012 PARCEL NUMBER 529 ASURBORD Date 11 (2)	-
Application description is 109-9575 and WAY Date 11/10/16	
Subdivision 33/5-040185	
Application description	
Property Zoning ASHEFORD 149LOTS RES/AGRI DIST - RA-20R	
Required RA-20R	
inspection.	
Phone Insp	
seq Insp# Code Description	
Initials Date	
Permit type RESIDENTIAL BUILDING PERMIT	
999 103 Pro-	
999 103 B103 R*BLDG FOUND & TEMP SVC POLE	
999 131 R131 ONE TRADE FINAL	
125 R125 ONE TRADE FINAL	