

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

### 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)

Owner (s) of Structure: Roy Williams Phone: \_\_\_\_\_

Owner (s) Mailing Address: 184 Summer Creek Ln Sanford NC, 27332

Land Owner Name (s): Same Phone: \_\_\_\_\_

Construction or Site Address: \_\_\_\_\_

PIN # \_\_\_\_\_ Parcel # \_\_\_\_\_

Job Cost: \$125 Description of Work to be done Irrigation Backflow inspection

This is linked to permit number 50044012

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

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 Dell Haire Plumbing LLC will provide the irrigation backflow inspection labor on this structure.  
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 32886P1, 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.

Dell Haire Plumbing LLC  
Contractor's Company Name  
PO Box 65048 Fayetteville, NC 28306  
Address  
32886P1  
License #

910 492-9939  
Telephone  
dellhaireplumbing@hotmail.com  
Email Address

Structure Owner / Contractor Signature:  Date: 5/8/19

By signing this application you affirm that you have obtained permission from the above listed license holder to purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or sell the listed property for 12 months after completion of the listed work.

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