

TSD

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: ROBERT MAURER Phone: _____

Owner (s) Mailing Address: 289 STONEMOND SCHOOL RD. NEWTON GRAVE

Land Owner Name (s): Clm Phone: _____

Construction or Site Address: 401 NORTH

PIN # _____ Parcel # _____

Job Cost: 2500 Description of Work to be done SEER PANE & WATER PIPING

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 PATRICK ELEC. CONT. will provide the ELECT labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 0910U, 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.

PATRICK ELEC. CONT. LLC
Contractor's Company Name

910 237-1594
Telephone

1309N MAIN ST. LILLINGTON
Address

Email Address

4910U
License #

Structure Owner / Contractor Signature: [Signature] Date: 2-14-19

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