Application	n	

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: Joshua Roinn	Phone: 910 849 5915
Owner (s) Mailing Address: 29 Fox hound ct	
Benson, NC 27504	
Land Owner Name (s): Joshua Qvino	Phone: 9108495915
Construction or Site Address: 853 Joe Collins Rd, L	illington NC 27546
PIN # Parcel #	
Job Cost: 300 Description of Work to be done Add m	neterbox/temp pole
Mechanical: New Unit With Ductwork New Unit Without Ductwork	ork Gas Piping Other
Electrical*: 200 Amp <200 Amp \(\sum \) Service Change Service For Progress Energy customers we need the premise	rvice Reconnect Other e number
Plumbing: Water/Sewer Tap Number of Baths	Water Heater
Specific Directions to Job from Lillington: 421 N, right on Joe Collins, go to end of right on Joe Collins Rd, 1/2 mile site is on I	road (stopsign) take
Subdivision:Lot ;	#:
(Contractors Name) will provide the Electrical	labor on this structure.
I am the building owner or my NC state license number is	, which entitles me to
perform such work on the above structure legally. All work shall comp	bly with the State Building Code and all
other applicable State and local laws, ordinances and regulations.	
Contractor's Company Name 29 Fox hound et, Benson Ne 27504 Address	Telephone yosh. vetrioentegmail. con Email Address
Eicense # Structure Owner / Contractor Signature: By signing this application you affirm that you have obtained permissic purchase permits on their behalf. If doing the work as owner you under the listed property for 12 months after completion of the listed work.	Date: 8320 on from the above listed license holder to erstand that you cannot rent, lease or sell

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