



CentralPermitting@Harnett.org
(910) 893-7525 ext:1
420 McKinney Pkwy (physical)
PO Box 65 (mailing)
Lillington, NC 27546

INDIVIDUAL TRADE APPLICATION

CONSTRUCTION TYPE (circle one): Residential Non-Residential

SITE ADDRESS: 215 Bright Water Drive Lillington NC PIN: _____

LANDOWNER: Cape Fear Valley Central Harnett Health Mailing Address: Above

City: _____ State: _____ Zip: _____ Phone: _____ Email: _____

JOB COST (required): \$15,000

DESCRIPTION OF WORK: Install 100 amp Subpanel & 5 emergency outlets on dedicated circuits

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

Electrical: 200 Amp ☐ Greater than 200 Amp ☐ Service Change ☐ Service Reconnect ☐ Other ☒

Plumbing: Water Tap/Sewer Connection ☐ Water Heater ☐ Number of Fixtures _____ Other _____

CONTRACTOR INFORMATION

* Must be owner or licensed contractor. Address, company name & phone must match information on license.

Contractor's Company Name: Hogue Electric Company Inc. Phone: 910-890-2556
Address: 2951 McDougald Road Lillington NC Email: al.hogue@prodigy.net
License #: 4424-U

Mechanical change outs & generator applications require both electrical & mechanical information. If applicable:

Contractor's Company Name _____ Phone _____
Address _____ Email _____
License # _____

I am the building owner or NC state licensed contractor, which legally entitles me to perform such work on the above structure. I attest that all work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations. **By signing this application, I affirm that I have obtained permission from the above listed license holder to purchase permits on their behalf.** If doing the work as owner, I understand that I cannot rent, lease, or sell the listed property for 12 months after completion of the listed work.

Curtis L. Hogue
Signature of Owner/Contractor

4-25-25
Date