

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: Dammon Sharp Phone: 910 364-6204

Owner (s) Mailing Address: 26 Carolina Oaks Cir
Linden, NC 28356

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: _____

PIN # 0534-95-9382.000 Parcel # 010544001201

Job Cost: 570321 Description of Work to be done Reconnect Goodman
3.5 ton Split System

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: Carolina Oaks Lot #: 1

I w+D Electric will provide the Electrical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 123436, 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.

w+D Electric
Contractor's Company Name

PO Box 768 Springlake NC
Address

123436
License #

910 497-6672
Telephone

wtelec2@aol.com
Email Address

Structure Owner / Contractor Signature: [Signature] Date: 7-16-19

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**