

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: Northpoint Apts Phone: 910-436-3328

Owner (s) Mailing Address: 16 B Wedgewood Dr.
Spring Lake NC 28390

Land Owner Name (s): Northpoint Lake Charles Phone: 910-436-3328

Construction or Site Address: 55-C Pinecrest

PIN # 0514-06-4365-000 Parcel # 0105140014

Job Cost: 125.00 Description of Work to be done: HVAC Reconnect skw

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 Baxters Electrical will provide the Electrical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 11284-U, 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.

Baxters Electrical
Contractor's Company Name
2104 Bingham Dr. Fay
Address
11284-U
License #

910-425-6500
Telephone
baxterselectrical@aol.com
Email Address

Structure Owner / Contractor Signature: David Baxter Date: 5-1-20

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