	Application #
Harnett County C PO Box 65 Lillington, NC 27546 - Ph: 910-893-752 Certification of Work Perfor (Individual Trac	25 - Fx: 910-893-2793 - www.harnett.org/permits rmed By Owner/Contractor
Owner (s) of Structure:	Phone: (910) 497-3746
Owner (s) Mailing Address:	
Land Owner Name (s):	
Construction or Site Address:	
PIN # Parcel #	
Job Cost:Description of Work to be done_	
Mechanical: New Unit With Ductwork New Unit W	ithout Ductwork Gas Piping Other
Electrical*: 200 Amp <200 Amp Service Char * For Progress Energy customers we need	nge Service Reconnect Other d the premise number
Plumbing: Water/Sewer Tap Number of Ba	aths Water Heater
Specific Directions to Job from Lillington:	
Subdivision:	Lot #:
I will provide the (Contractors Name)	labor on this structure. (Trade)
I am the building owner or my NC state license number is	s, which entitles me to
perform such work on the above structure legally. All wo	rk shall comply with the State Building Code and all
other applicable State and local laws, ordinances and reg	gulations.
Contractor's Company Name	Telephone
Address 28306	Email Address
<u></u>	
License #	
Structure Owner / Contractor Signature:	Date:
By signing this application you affirm that you have obtain purchase permits on their behalf. If doing the work as ow the listed property for 12 months after completion of the I	ner you understand that you cannot rent, lease or sell

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