| 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: | | Phone: | |
|---|--|---|--|
| Owner (s) Ma | ailing Address: | | |
| | | Phone: | |
| Construction | or Site Address: | | |
| | | Parcel # | |
| Job Cost: | Description of W | ork to be done | |
| 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 Dire | ctions to Job from Lillington: | | |
| Subdivision: | | Lot #: | |
| I will provide the (Contractors Name) | | de the labor on this structure. | |
| I am the building owner or my NC state license number is, which entitles me | | | |
| | | e legally. All work shall comply with the State Building Code and a | |
| • | ble State and local laws, ord | | |
| Contractor's Company Name | | Telephone | |
| Address | | Email Address | |
| I <u>ECH L.16701 /</u> License # | ELEC 30152 | | |
| Structure Ow | ner / Contractor Signature: | Veronica Torres Date: | |

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