| 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   | lailing Address:   |   |  |
| Land Owner   |  | Phone:  |  |
| Construction   | or Site Address:   |   |  |
|  |  |   |  |
| Job Cost:  | Description of Work to be done   |   |  |
| Mechanical:  | New Unit With Ductwork New Unit With   |   |  |
| Electrical*:   | *: 200 Amp <200 Amp Service Change Service Reconnect Other<br>* For Progress Energy customers we need the premise number |   |  |
| Plumbing:  | Water/Sewer Tap Number of Bath   | s Water Heater  |  |
| Specific Dire  | ections to Job from Lillington:  |   |  |
| Subdivision:   |  | _Lot #:   |  |
| I(Cor  | will provide the   | labor on this structure.                                  |  |
| I am the building owner or my NC state license number is |  | , which entitles me to                                    |  |
|  | h work on the above structure legally. All work able State and local laws, ordinances and regul                          | shall comply with the State Building Code and all ations. |  |
| Contractor's Company Name                                |  | Telephone   |  |
| Address  |  | Email Address   |  |
| License #  |  |   |  |
| Structure Ow   | wner / Contractor Signature: <u>fluhand M</u>  |   |  |

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