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) Mailing Address: Land Owner Name (s): \_\_\_\_\_ Phone: \_\_\_\_\_ Construction or Site Address: PIN #\_\_\_\_\_ Parcel #\_\_\_\_\_ Job Cost: Description of Work to be done Mechanical: New Unit With Ductwork New Unit Without Ductwork Gas Piping Other 200 Amp \_\_\_\_ <200 Amp \_\_\_\_ Service Change \_\_\_\_ Service Reconnect \_\_\_\_ Other \_\_\_\_ Electrical\*: \* For Progress Energy customers we need the premise number Water/Sewer Tap \_\_\_\_ Number of Baths \_\_\_\_ Water Heater \_\_\_\_ Plumbing: Specific Directions to Job from Lillington: Subdivision: \_\_\_\_\_Lot #: \_\_\_\_\_ will provide the \_\_\_\_\_ labor on this structure. (Contractors Name) (Trade) I am the building owner or my NC state license number is \_\_\_\_\_\_, 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. Contractor's Company Name Telephone Address Email Address License # Structure Owner / Contractor Signature: <u>NGCLA COVANGTON</u> 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