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: DEBRA COPPOD Phone: 9/9 908 5409
Owner (s) Mailing Address: 1934 Cha US 421
LILLINGTON NC.
Land Owner Name (s): Short Phone:
Construction or Site Address:
PIN# 61040-31-9503.000 Parcel# 24615912
Job Cost: 1500. + Description of Work to be done INSTON GENERATOR
Mechanical: New Unit With Ductwork New Unit Without Ductwork Gas Piping Other A-3
Electrical*: 200 Amp <200 Amp Service Change Service Reconnect Other \(\subseteq \) * For Progress Energy customers we need the premise number
Plumbing: Water/Sewer Tap Number of Baths Water Heater
Specific Directions to Job from Lillington: OLD H2) N HOUSE BEGIBE OND REST HIMP
Subdivision:Lot #:
MARCH EAST will provide the ELECT (Much labor on this structure. (Contractors Name) (Trade) / Famur LP 22504
I am the building owner or my NC state license number is 49/0 , 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.
PATAILK KKELL CENT 140 910,237, 1591
Contractor's Company Name Telephone Telephone
Address Email Address
License #
Structure Owner / Contractor Signature: Date: Da
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