

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: Shirley Cooley Phone: 318-493-1172

Owner (s) Mailing Address: 47 Pinnacle drive
Spring Lake NC 28390

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: 47 Pinnacle Drive Spring Lake NC 28390

PIN # _____ Parcel # _____

Job Cost: _____ Description of Work to be done installing 8 recepticals in an unfinished attic space

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 Directions to Job from Lillington:

Subdivision: _____ Lot #: _____

I Blantons Air, Plumbing, & Electric will provide the Electrical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 31814, 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.

Blanton's Air, Plumnbng, & Electric
Contractor's Company Name
1769 pamalee drive
Address
31814
License # _____

910-867-5309
Telephone
info@blantonsair.com
Email Address

Structure Owner / Contractor Signature:  Date: 2/22/2019

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**