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: Northpoint Lake Charles UC	Phone: 910-436-3328
Owner (s) Mailing Address: 16 B Wedgewood Dr	
Spring Lake NC 28390 Land Owner Name (s):Phone: Construction or Site Address: 48 A Jeff St Spring Lake NC 28390	
PIN # Parcel #	
Job Cost:Description of Work to be done	
Mechanical: New Unit With Ductwork New Unit Without Du	uctwork Gas Piping Other
Electrical*: 200 Amp <200 Amp Service Change * For Progress Energy customers we need the prer	Service Reconnect Other mise number
Plumbing: Water/Sewer Tap Number of Baths	Water Heater
Specific Directions to Job from Lillington:	
Subdivision: Northpoint apartments	Lot #:
I will provide the	labor on this structure.
(Contractors Name) will provide the labor on this structure.	
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 of	comply with the State Building Code and all
other applicable State and local laws, ordinances and regulations.	
Contractor's Company Name	Telephone
	and the same of th
Address	Email Address
License #	
License #	
Structure Owner / Contractor Signature:	Date: 2-28-9
By signing this application you affirm that you have obtained pern purchase permits on their behalf. If doing the work as owner you	

*Company name, address, & phone must match information on license

the listed property for 12 months after completion of the listed work.