| 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: Thomas Sandes Phone: 9/9 935 7667 |
|--|
| Owner (s) Mailing Address: 4446 610 U.S 421 |
| |
| Land Owner Name (s): Thomas Scales Phone: Phone: |
| |
| PIN# 0630 -16 -9372.000 Parcel# 1306800038 09 |
| Job Cost: Description of Work to be done funing electric to two Sheds |
| Mechanical: New Unit With Ductwork New Unit Without Ductwork Gas Piping Other |
| Electrical*: 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: |
| theat west on old 421. The house will be an the right. |
| Subdivision: N/A Lot #: 3 |
| (Contractors Name) will provide the Electrical labor on this structure. (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 4446 old 1/5421 lilling for INC 27546 Address Telephone +z Sand man (a) (main) - (a) Email Address |
| License # |
| Structure Owner / Contractor Signature: |
| 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



INSPECTION TYPE

ELECTRICAL RESIDENTIAL 910-893-7525

www.harnett.org

PERMIT NUMBER ERES1904-0024

| JOB ADDRESS: 4446 OLD US 421 | PERMIT SUBTYPE: ALL OTHER MINIMUM ELECTRICAL | | PARCEL NO: 0630-16-9372.000 | | |
|---|--|--------|-----------------------------|--|--|
| DESCRIPTION: running electric to two sheds | DATE ISSUED: DATE EX | | XPIRED: | | |
| PLAN NAME: | ZONING DISTRICT : RA-30 - 5.29 acres (100.0%) | | | | |
| | | | | | |
| APPLICANT: | | PHONE: | | | |
| · · | | | | | |
| CONTRACTOR: SANDERS THOMAS | | | | | |
| 4446 OLD US 421 LILLINGTON, NC 27546 SANFORD, NC 27332-1373 | | | EMAIL: | | |
| OWNER: SANDERS THOMAS | | | | | |
| 4446 OLD US 421 LILLINGTON, NC 27546 SANFORD, NC 27332-1373 | | | | | |

REQUIRED INSPECTIONS

DATE

COMMENTS

APPROVAL



Cash Register Receipt Harnett County

Receipt Number R3037

| DESCRIPTION | | | QTY | PAID |
|--------------------|--------------------------|-----------------------|-----|---------|
| PermitTRAK | | | | \$60.00 |
| ERES1904-0024 | Address: 4446 OLD US 421 | APN: 0630-16-9372.000 | | \$60.00 |
| RESIDENTIAL E | LECTRIC FEES | | | \$60.00 |
| MININ | IUM ELECTRICAL FEE | | 0 | \$60.00 |
| TOTAL FEES PAID BY | Y RECEIPT: R3037 | | | \$60.00 |

Date Paid: Monday, April 15, 2019

Paid By: SANDERS THOMAS

Cashier: LL

Pay Method: EMV H56178 | 239268068

