

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: MATRIX PROPERTIES Phone: 919-991-0640

Owner (s) Mailing Address: _____

Land Owner Name (s): SAME Phone: _____

Construction or Site Address: 54 SAGE BRUSH CT.

PIN # _____ Parcel # _____

Job Cost: 500.00 Description of Work to be done: REPLACE WIRE TAKEN OUT OF HOUSE

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 #: _____

PATRICK ELECT. will provide the ELECT. labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 47100, 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.

PATRICK ELECT. CONT. INC
Contractor's Company Name Telephone _____
1309 N MAIN ST LILLINGTON
Address Email Address _____
47100
License #

Structure Owner / Contractor Signature: [Signature] Date: 10-15-19

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