

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: Kelly Bain Phone: _____

Owner (s) Mailing Address: 439 Keith Hills Rd
Lillington, NC 27546

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: _____

PIN # _____ Parcel # _____

Job Cost: unknown Description of Work to be done Install pad mounted NG 20KW generator with transfer Switch

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:

Mechanical Contractor: Carolina Gas sals and service, Dillion Tart #20968

Subdivision: _____ Lot #: _____

I Nathan Sayers will provide the Electrical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 30099-L, 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.

NT Electrical Service
Contractor's Company Name
7014 Rockridge Ln
Address
30099-L
License # _____

(910) 446-1089o/ (910) 303-3486c
Telephone
ntsayers@gmail.com
Email Address

Structure Owner / Contractor Signature:  Date: 18MAR20

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**