

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: T3T Spring Lake, LLC Phone: 919 697 1967

Owner (s) Mailing Address: 1150 Hungry Neck Blvd Ste C-359
Mt. Pleasant, SC 29464

Land Owner Name (s): T3T Spring Lake, LLC Phone: 919 697 1967

Construction or Site Address: 189 Connie Court Spring Lake, NC 28390

PIN # 0514-02-6504.000 Parcel # 0105 14 0052

Job Cost: _____ Description of Work to be done Power reconnect.

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:

210 South, turn Right on Ray Road, turn right on McKay
turn left onto Connie Court.

Subdivision: Spring Lake MHP, LLC Lot #: 189 Connie Court
Spring Lake, NC 28390

I _____ will provide the _____ labor on this structure.
(Contractors Name) (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.

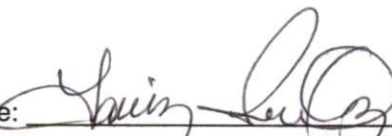
Contractor's Company Name _____

Telephone _____

Address _____

Email Address _____

License # _____

Structure Owner / Contractor Signature:  Date: 5-19-2020

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**