

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: Annette Johnson Phone: 919-796-0612

Owner (s) Mailing Address: 710 Slippery Bank Ct.  
Benson NC 27504

Land Owner Name (s): SAME Phone: \_\_\_\_\_

Construction or Site Address: 2184 Bailey Rd Coats 11 Brant

PIN # \_\_\_\_\_ Parcel # \_\_\_\_\_

Job Cost: \_\_\_\_\_ Description of Work to be done re inspect only

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:

421 to Coats Hwy 27 left thru Coats, left on Bailey Rd

Subdivision: none Lot #: \_\_\_\_\_

I N/A house in intact 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: Annette Johnson Date: 6-9-2020

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