

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: JAMES JOHNSON, JR. Phone: 910.263.4944

Owner (s) Mailing Address: 46 CREATURE MSAOOW LANE
ANBISA NC 27501

Land Owner Name (s): SAME Phone: SAME

Construction or Site Address: SAME

PIN # _____ Parcel # _____

Job Cost: _____ Description of Work to be done HAD FIRE IN BARN REWIRED AS IT WAS PRIOR TO FIRE

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:
NSAR OLD STAGE + SS INTERSECTION

Subdivision: _____ Lot #: _____

I Homeowner 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: 6-30-20

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**