

Application # \_\_\_\_\_

### 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: Jesie Martin Phone: 9103641580

Owner (s) Mailing Address: 135 Crystal Point  
Sanford, NC 27332

Land Owner Name (s): Same As Above Phone: \_\_\_\_\_

Construction or Site Address: \_\_\_\_\_

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

Job Cost: 9950 Description of Work to be done \_\_\_\_\_  
Install a 20KW pad mount generator w/ dual switches

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:  
In Crolina Lakes

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: 24 June 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**

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Certification of Work Performed By Owner/Contractor  
(Individual Trade Application)

Owner (s) of Structure: Jesse Martin Phone: 910) 364-1580  
Owner (s) Mailing Address: 135 Crystal Point  
Sanford, NC 27332  
Land Owner Name (s): Jesse Martin Phone: 910) 364-1580  
Construction or Site Address: 135 Crystal Point  
PIN # \_\_\_\_\_ Parcel # \_\_\_\_\_

Job Cost: \_\_\_\_\_ Description of Work to be done: Run Gas line for Generator.

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 #: \_\_\_\_\_

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.

Parker Gas Co.  
Contractor's Company Name  
2785 Owen dr Fayetteville NC  
Address  
29505  
License #

910) 323-8283  
Telephone  
r.larson@parkergas.com  
Email Address

Structure Owner / Contractor Signature: Samuel Newberry Date: 7/10/20

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