Application	#
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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 Stru	cture: Carmen Ramos	Phone: 910-922-2021		
Owner (s) Mailing	Address: 2665 S HWY 210 NC			
.,	Lillington NC 27546			
Land Owner Nam	e (s):	Phone:		
Construction or S	ite Address:			
PIN #	Par	cel #		
Job Cost:	Description of Work to be do	ne		
		it Without Ductwork Gas Piping Other		
Electrical*: 200	trical*: 200 Amp <200 Amp Service Change _ Service Reconnect V Other * For Progress Energy customers we need the premise number			
Plumbing: V	Vater/Sewer Tap Number of	of Baths Water Heater		
Premise number 4514				
Subdivision:		_Lot #:		
I(Contrac	will provide the	labor on this structure. (Trade)		
I am the building owner or my NC state license number is, which entitles me to				
perform such wor	k on the above structure legally. A	l work shall comply with the State Building Code and all		
other applicable s	State and local laws, ordinances and	d regulations.		
Contractor's Con	pany Name	Telephone		
Address		Email Address		
License #				
Structure Owner	/ Contractor Signature:	Date: 7/27/20		
		htained permission from the above listed license holder		

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