Ali-stion #	
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: Sirus Weighbars Phone: 9/0-892-5441	
Owner (s) Mailing Address: 474 Weeks Rd	_
Deck 416 28334	_
and Owner Name (s): Sirus Weigh bors Phone: 910-882-544	_
Construction or Site Address: 474 Weeks Ry	_
PIN # Parcel #	
ob Cost: 900 Description of Work to be done Electrical Service Change	_
Mechanical: New Unit With Ductwork New Unit Without Ductwork Gas Piping Other	
Electrical*: 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: Hay 421 To Durn left on Hwy 301 Right on Stewart Rd Right On Weeks Rd, 31 to on Cight	_
Subdivision:Lot #:	_
(Contractors Name) will provide the	
am the building owner or my NC state license number is 2002 , which entitles me to	
perform such work on the above structure legally. All work shall comply with the State Building Code an	d al
other applicable State and local laws, ordinances and regulations.	
BEH Electric 918-427-2573	_
Contractor's Company Name 1292 Old Hamilton Rel Dww 23374 Email Address	_
Address Z0/02	
Exerciture Owner / Contractor Signature Date: /0-2-20	
Structure Owner / Contractor Olgrandie.	
By signing this application you affirm that you have obtained permission from the above listed license ho	Ide

By signing this application you affirm that you have obtained 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.