

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: Truman Lyles Phone: 919-935-4977

Owner (s) Mailing Address: 75 Secretariate Cir
SANFORD, NC 27332

Land Owner Name (s): Truman Lyles Phone: _____

Construction or Site Address: 75 Secretariate Cir

PIN # _____ Parcel # _____

Job Cost: 22,000 Description of Work to be done SPA

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: Hot Tub / SPA connection

Subdivision: _____ Lot #: _____

I Mike Smith will provide the Electrical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 23712-1, 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.

Mike Smith
Contractor's Company Name

919-417-6369
Telephone

Address
23712-1
License #

frontierelectrical2011@gmail.com
Email Address

Structure Owner / Contractor Signature [Signature] Date: 11/3/20

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