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) |
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| Owner (s) of Structure: Charline Chart Phone: 201-000-0468 Owner (s) Mailing Address: 221 Crown Point, Sanford NC 37332 |
| Land Owner Name (s):Phone: Construction or Site Address: PIN # Parcel # |
| Job Cost: 2,000 Description of Work to be done 200 amp pane! |
| 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: |
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| Subdivision:Lot#; |
| (Confractors Name) will provide the <u>ELECTRICAL</u> labor on this structure, lam the building owner or my NC state license number is 31418L, 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. |
| Cath Fear Floring Springs Contractor's Company Name 139 Robeson St. Tayettville LC Address 31418L License # Cath Fear Floring Springs Cath Grant Springs Cath Gr |
| Structure Owner / Contractor Signature: Date: |
| 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