

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: BAVIN ONDIEKI Phone: 650-387-3246

Owner (s) Mailing Address: 186 Rushmore Ct,
Raeford, NC 28376

Land Owner Name (s): JAYS CIMARRON PROPERTIES Phone: 631-896-4194

Construction or Site Address: 79 Cimarron Dr, Spring Lake, NC, 28390

PIN # _____ Parcel # _____

Job Cost: NA Description of Work to be done To inspect and reconnect to grid

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:

Head northeast on NC-210 N toward Rosser Rd, Turn left onto Cimarron Dr,
Destination will be on the left

Subdivision: _____ Lot #: 79

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

I am the building owner or my NC state license number is OWNER, 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.

N/A

Contractor's Company Name _____ Telephone _____

Address _____ Email Address _____

License # _____

Structure Owner / Contractor Signature:  Date: 4/12/2021

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**