| Application # | |
|---------------|--|
| | |

to

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: | | Phone: | |
|---------------------------|-----------------------------|--|--|
| Owner (s) Ma | ailing Address: | | |
| | | Phone: | |
| Construction | or Site Address: | | |
| | | Parcel # | |
| Job Cost: | Description of | Work to be done | |
| Mechanical: | New Unit With Ductwork | New Unit Without Ductwork Gas Piping Other | |
| Electrical*: | | Service Change Service Reconnect Other ustomers we need the premise number | |
| Plumbing: | Water/Sewer Tap | Number of Baths Water Heater | |
| | | Lot #: | |
| | | vide the labor on this structure. (Trade) license number is, which entitles me to | |
| | | ure legally. All work shall comply with the State Building Code and all | |
| • | | ordinances and regulations. | |
| Contractor's Company Name | | Telephone | |
| Address | | Email Address | |
| License # | | | |
| Structure Ow | vner / Contractor Signature | ::Dohnnis Mabry | |
| | | at you have obtained permission from the above listed license holder tong the work as owner you understand that you cannot rent, lease or sell | |

*Company name, address, & phone must match information on license

the listed property for 12 months after completion of the listed work.