

### 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: LEWood E. Royals Phone: 910-591-8338  
Owner (s) Mailing Address: 10056 US 4215 ERWIN, NC 28339

Land Owner Name (s): LEWood E. Royals Phone: 910-591-8338  
Construction or Site Address: 101 Verwell RD ERWIN, NC 28339  
PIN # \_\_\_\_\_ Parcel # \_\_\_\_\_

Job Cost: \_\_\_\_\_ Description of Work to be done \_\_\_\_\_

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:

EAST 421 to 1 mile from ERWIN, Verwell Rd  
is on left

Subdivision: \_\_\_\_\_ Lot #: \_\_\_\_\_

LEWood Royals will provide the Re Install 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.

Contractor's Company Name \_\_\_\_\_

Telephone \_\_\_\_\_

Address \_\_\_\_\_

Email Address \_\_\_\_\_

License # \_\_\_\_\_

Structure Owner / Contractor Signature: [Signature] Date: 1-18-22

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**



Town of Erwin  
**Zoning Application & Permit**  
 Planning & Inspections Department

Permit #

Rev Sep2014

Each application should be submitted with an attached plot/site plan with the proposed use/structure showing lot shape, existing and proposed buildings, parking and loading areas, access drives and front, rear, and side yard dimensions.

Name of Applicant	Lenwood R04915	Property Owner	
Home Address	101 Verneil RD	Home Address	
City, State, Zip	Erwin, NC 28339	City, State, Zip	
Telephone		Telephone	
Email		Email	

Address of Proposed Property	101 Verneil RD		
Parcel Identification Number(s) (PIN)	0598-4-7781.00	Estimated Project Cost	
What is the applicant requesting to build / what is the proposed use of the subject property? Be specific.	Re connect electricity to home		
Description of any proposed improvements to the building or property			
What was the Previous Use of the subject property?			
Does the Property Access DOT road?	Yes		
Number of dwelling/structures on the property already	3	Property/Parcel size	.5
Floodplain SFHA	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Watershed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
		Wetlands	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>MUST</b> circle one that applies to property	Existing/Proposed <u>Septic System</u> Or Existing/Proposed County/City Sewer		

**Owner/Applicant Must Read and Sign**

The undersigned property owner, or duly authorized agent/representative thereof certifies that this application and the forgoing answers, statements, and other information herewith submitted are in all respects true and correct to the best of their knowledge and belief. The undersigning party understands that any incorrect information submitted may result in the revocation of this application. Upon issuance of this permit, the undersigning party agrees to conform to all applicable town ordinances, zoning regulations, and the laws of the State of North Carolina regulating such work and to the specifications of plans herein submitted. The undersigning party authorizes the Town of Erwin to review this request and conduct a site inspection to ensure compliance to this application as approved.

		1-18-22
Print Name	Signature of Owner or Representative	Date

**For Office Use**

Zoning District	R0	Existing Nonconforming Uses or Features	
Front Yard Setback	40'	Other Permits Required	<input type="checkbox"/> Conditional Use <input type="checkbox"/> Building <input type="checkbox"/> Fire Marshal <input checked="" type="checkbox"/> Other
Side Yard Setback	12'	Requires Town Zoning Inspection(s)	<input type="checkbox"/> Foundation <input type="checkbox"/> Prior to C. of O.
Rear Yard Setback	40'	Zoning Permit Status	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied
		Fee Paid:	— Date Paid: — Staff Initials: —

Comments	No changes to home -> electric reconnect
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Signature of Town Representative:	Date Approved/Denied: 1/18/2022
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Contact Harnett County Development Services to obtain electric permit  
 910-893-7525