

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: Kelvin Gonzalez Phone: 910.208.9676
Owner (s) Mailing Address: _____

Land Owner Name (s): Kelvin Gonzalez Phone: _____
Construction or Site Address: 50 N IDA ST - COATS NC
PIN # _____ Parcel # _____

Job Cost: 600⁰⁰ Description of Work to be done Service Change - Can lights
Check work that was done on site

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: _____

Subdivision: _____ Lot #: _____

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

I am the building owner or my NC state license number is 13791-I, 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.

Power Source Electrical Const Co
Contractor's Company Name
P.O. 684 Fayetteville NC 28302
Address
13791-I
License #

910.308.9926
Telephone
powersource@nc.rr.com
Email Address

Structure Owner / Contractor Signature: [Signature] Date: 2.8.22

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**

NOTE: Attach a site plan that includes property lines (front, side, and rear), location of proposed structures (including driveways, decks, etc.), and existing structures. This plan should be drawn to scale. This form along with plans shall be submitted to the Harnett County Building Inspections Department.

Permit No.: 2-7-22-1 Date: 2/7/22 Fee: \$50

Parcel ID*: 07069016196002 01 Area Zoned As: R-6 Residential

APPLICANT:
Name (Print) Brown Sance Elec. Smalls
Address P.O. 684
City, State FAY NC
Zip Code 28302
Phone # 910-308-9926

PROPERTY OWNER:
Name Kelvin Gonzalez
Address 50 N. LIDA ST
City, State Coats NC
Zip Code
Phone # 308 9926

Location of Property: IN-TOWN ETJ ETJ (contiguous)

Present Use of Property: Single Family

PROPOSED USE OF PROPERTY:

- [X] Single Family Dwelling: # Rooms: # Bedrooms: Square Feet:
[] Multi Family Dwelling: # of Units: #Bedrooms (per unit): Square Feet (per unit)
[] Mobile Home (single lot): Single wide: Double Wide:
[] Mobile Home Park: Section 16, Zoning Ordinance must apply
[] Business: Total # of employees per day Type of business
[] Others (specify):

[X] Existing structure: Renovate: [checked] Addition: Demolish:

WATER AND SEWER SUPPLY:

Water: [] Private [X] Public [] Proposed [] Existing
Sewer: [] Private [X] Public [] Proposed [] Existing

Applicant: I certify that all of the information presented in this application is true, complete, and accurate to the best of my knowledge. False information is grounds for rejection of the application.

Signature: [Handwritten Signature] Date: 2-7-22 APPROVED

ZONING ADMINISTRATOR USE ONLY
Notes: Electrical permit @ Harnett Central Permitting
Approved: [checked] Denied: []
Zoning Administrator: [Handwritten Signature] Date: 2/7/22
TOWN OF COATS ZONING VALID FOR 12 MONTHS

THIS PERMIT IS VALID FOR 12 MONTHS