Application #	
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Harnett County Central Permitting

Mailing Address - PO Box 65 Lillington, NC 27546 - Physical Address - 420 McKinney PKWY Lillington NC 27546

Ph.: 910-893-7525 - Fax: 910-893-2793 - www.harnett.org/permits

Certification of Work Performed By Owner/Contractor (Individual Trade Application)

Owner (s) of Structure: 92 TANNING KIDGE DR Phone:		
Owner (s) Mailing Address: DUNN NC 28334		
Land Owner Name (s) BELLS Phone: Construction or Site Address:		
PIN # Parcel #		
Job Cost (Required): 500 Description of Work to be done TWITALL GAS PIENS TO WHOLE HOME COENERATOR		
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 #:		
(Contractors Name) will provide the wechoose (Trade)		
I am the building owner or my NC state license number is, 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 (919) 594 - 3842 Telephone		
3469 No Huy S BENJON NC Email Address		
Address		
icense #		
Structure Owner / Contractor Signature: 2002 Sella Date: 13-31-2		
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 p listed work.

*Company name, address, & phone must match information on license Faxed or Mailed application could have an approximately 1-5 day process time

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Certification of Work Performed By Owner/Contractor (Individual Trade Application)

D.C.
Owner (s) of Structure: 92 TANNING RIDGE DR Phone:
Owner (s) of Structure: 12 TANNING THIRD Owner (s) Mailing Address: DOWN NC 28334
Owner (s) Mailing Address:
Land Owner Name (s): RONNIE BELLS Phone:
Land Owner Name (s): // SAME DECE
Construction or Site Address:Parcel #
PIN #
Job Cost (Required): Description of Work to be done
Job Cost (Required): Description of Tolking Co
ELECTRICAL PSIC WHOLE
Mechanical: New Unit With Ductwork New Unit Without Ductwork Gas Piping Other
Service Reconnect Other
* For Progress Energy customers we need the promise visiting
Plumbing: Water/Sewer Tap Number of Baths Water Heater
Specific Directions to Job from Lillington:
Subdivision:Lot #:
Subdivision:
BROOK (FE will provide the E(FCRECAL labor on this structure. (Contractors Name) (Trade)
I am the building owner or my NC state license number is 29333—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.
Scarce LEE FLECTRIC (915) 759 - 7896 Telephone
Contractor's Company Name
Address Email Address Compile Com
Address
24333-1
License #
/ \ /
Structure Owner / Contractor Signature: Date: 13-31-2

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 Faxed or Mailed application could have an approximately 1-5 day process time