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Harnett County Central Permitting

PO Box 65 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: Claude Tweed Phone: (910) 364-1895 |
|---|
| Owner (s) Mailing Address: 12292 210 North Carolina Spring lake N.C. |
| Land Owner Name (s): 128390 Land Owner Name (s): 128390 Phone: 910 364-1895 |
| Construction or Site Address: 12292 North 210 Spring lake N.C. |
| PIN #Parcel # |
| Job Cost (Required): 8400 Description of Work to be done installed meter base, |
| Mechanical: New Unit With Ductwork New Unit Without Ductwork Gas Piping Other |
| Electrical* 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 #: |
| 1 Charles Brooks will provide the Electrical labor on this structure. (Contractors Name) |
| 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. |
| Charles M. Brooks Electrical Contractor's Company Name Contractor's Company Name Telephone Charles morooks electrical ginging Email Address Telephone Charles morooks electrical ginging Email Address |
| |
| License # Structure Owner / Contractor Signature: Date: 1/23/23 |

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