

Application # _____

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: Bruce McGruder Phone: 571-243-5829
Owner (s) Mailing Address: 382 Chartres St. Fuquay-Varina 27526

Land Owner Name (s): _____ Phone: _____
Construction or Site Address: 382 Chartres St. Fuquay-Varina
PIN # 0613-76-9021.000 Parcel # 050613 0184

Job Cost: 14,000 Description of Work to be done install 22kW generator
install

Mechanical: New Unit With Ductwork ___ New Unit Without Ductwork ___ Gas Piping ___ Other ___

Electrical*: 200 Amp ___ <200 Amp ___ Service Change ___ Service Reconnect ___ Other install generator
* 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: Bulk II Captains Landing of #: 20

I Eric Grainer will provide the electrical/mechanical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 36174, 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.

Michael and Son Services
Contractor's Company Name
4001 Atlantic Ave.
Address
36174/33791
License #

(919)390-1094
Telephone
permitsnc@michaelandson
Email Address

Structure Owner / Contractor Signature: Eric Grainer Date: 8/24/23

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