

Application # _____

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: STEVE SIKORSKI Phone: 203 482-5819

Owner (s) Mailing Address: 52 BOBIE LANDING DRIVE
LILLINGTON

Land Owner Name (s): SHANE Phone: _____

Construction or Site Address: _____

PIN # _____ Parcel # _____

Job Cost (Required): 2200.00 Description of Work to be done: INSTALL GENERATOR
PARKER GAS 22504

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 #: _____

TOMMY PATRICK will provide the ELECT. labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 49100, 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.

PATRICK ELECTRICAL CONT LLC
Contractor's Company Name

910 237 1594
Telephone

1309 N MAIN ST LILLINGTON
Address

Email Address

49100
License #

Structure Owner / Contractor Signature: Tommy Patrick Date: 9-8-23

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

