Ap	plication	#				

**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: DENISE Khodes Phone: 919-614-5026
Owner (s) Mailing Address: 506 FRED BURNS ROAD
FUQUAY, 27526
Land Owner Name (s):Phone:
Construction or Site Address:
PIN # Parcel #
Job Cost (Required): 3000. Description of Work to be done SEVICE CHANGE &
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 #:
THOMAS WEST will provide the F/ECHICAL 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.
Swatt Electric Contractor's Company Name  306 WEST E. STREET, Epwin 28339  Address  L. 36336  719-812-9929  Telephone  Thomaswest41 D Cmail. Con Email Address
License #
Structure Owner / Contractor Signature:
Du signing this application you office that you have ablained namicalist from the should live a belief

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.

Email: Centralpermitting@harnett.org

\*Company name, address, & phone must match information on license

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