Application #

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: WF Hb	LLC	Phone: 910 602 2477
Queen (a) Mailing Address: 7 IVII MS	Arthur Rd.	
Fayetteri	1111. 20011	
,		Phone:
Construction or Site Address: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	inthia LN	
PIN#	Parcel #	
Job Cost (Required):Description	0 -1	Lating LIM [1.
Job Cost (Required):Description	of Work to be done	ALE OLD HILL LOUISING
W NEW 200 Amg Jer		
-		rk Gas Piping Other
Electrical*: 200 Amp 200 Amp <200 Amp 200 Amp <a href="</td"><td>Service Change Serviners we need the premise</td><td>ice Reconnect Other number</td>	Service Change Serviners we need the premise	ice Reconnect Other number
Plumbing: Water/Sewer Tap	Number of Baths	Water Heater
Specific Directions to Job from Lillington:	SFE Bethel Bo	ptist Rd.
Subdivision:	Lot #	:
(Contractors Name) I am the bullding owner or my NC state lice	nse number is 5703	y-L, which entitles me to
perform such work on the above structure	egally. All work shall comp	ly with the State Building Code and all
other applicable State and local laws, ordin		
Culbreth Ele Contractor's Company Name 8069 Stone Fay, NC	28306	Telephone 910-977-6372 sculbr3249@hotmall.com
	Culbreth	Elliali Addiess
License #	11 11	40
Structure Owner / Contractor Signature:	Sidney Culhe	Date: 1-2.3 -24
By signing this application you affirm that yourchase permits on their behalf. If doing the listed property for 12 months after com-	he work as owner you unde	on from the above listed license holder t erstand that you cannot rent, lease or se

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