

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: Teresa Ratchliff Phone: 919-398-8849

Owner (s) Mailing Address: 8581 US Hwy 401 Fuquay Varina

Land Owner Name (s): Teresa Ratchliff Phone: 919-398-8849

Construction or Site Address: 8581 US Hwy 401 Fuquay Varina

PIN # _____ Parcel # _____

Job Cost (Required): 17,400.00 Description of Work to be done: Install 24 Kw Generator - Replacing Meter base, 2-200 Amp Panels

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 #: _____

Zips Electric LLC will provide the electric labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 21119, 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.

Zips Electric LLC 910 527-9404
Contractor's Company Name Telephone
5211 Percy Olive Dr Hope Mills, NC zipselectric@gmail.com
Address 28348 Email Address
21119
License #

Structure Owner / Contractor Signature: [Signature] Date: 3/7/24

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

Application # _____

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Specific Directions to Job from Lillington:

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I _____ will provide the _____ labor on this structure.
(Contractors Name) (Trade)

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.

The Propane Store
Contractor's Company Name
152 North Raleigh St Angier
Address
32603 27501
License # _____

910-658-1632
Telephone
aroon.garner@thePropaneStore.com
Email Address

Structure Owner / Contractor Signature: _____ Date: _____

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