

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: EARL R. GASSAWAY Phone: 910-624-5909 owner

Owner (s) Mailing Address: 255 RAINY DR.
SPRING LAKE NC 28390

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: _____

PIN # 0514-30-3423 Parcel # _____

Job Cost: _____ Description of Work to be done Ele in Residential
Use only! - to be storage only.

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:
SAME AS ADDRESS

Subdivision: _____ Lot #: _____

I OWNER
EARL GASSAWAY will provide the ELECT 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.

Contractor's Company Name _____ Telephone _____

Address _____ Email Address _____

License # _____

Structure Owner / Contractor Signature: EARL R. GASSAWAY Date: 5-31-24

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