



CentralPermitting@Harnett.org
(910) 893-7525 ext:1
420 McKinney Pkwy (physical)
PO Box 65 (mailing)
Lillington, NC 27546

INDIVIDUAL TRADE APPLICATION

CONSTRUCTION TYPE (circle one): **Residential** Non-Residential

SITE ADDRESS: 154 Southern Place Lillington, NC 27546 PIN: _____

LANDOWNER: Caleb King Mailing Address: 154 Southern Place
City: Lillington State: NC Zip: 27546 Phone: (910) 262-9316 Email: calebalexanderking@gmail.com

JOB COST (required): 1800

DESCRIPTION OF WORK: 15 amp cicuit for office

Mechanical: New Unit With Ductwork ☐ New Unit Without Ductwork ☐ Gas Piping ☐ Other _____
Electrical: 200 Amp ☐ Greater than 200 Amp ☐ Service Change ☐ Service Reconnect ☐ Other circuit
Plumbing: Water Tap/Sewer Connection ☐ Water Heater ☐ Number of Fixtures _____ Other _____

CONTRACTOR INFORMATION


* Must be owner or licensed contractor. Address, company name & phone must match information on license.

Micahel & Son Services- Eric Gaiber	919-390-1094
Contractor's Company Name	Phone
4001 Atlantic Ave Raleigh, NC 27604	permitsnc@michaelandson.com
Address	Email
36174	
License #	

Mechanical change outs & generator applications require both electrical & mechanical information. If applicable:

Contractor's Company Name	Phone
Address	Email
License #	

I am the building owner or NC state licensed contractor, which legally entitles me to perform such work on the above structure. I attest that all work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations. **By signing this application, I affirm that I have obtained permission from the above listed license holder to purchase permits on their behalf.** If doing the work as owner, I understand that I cannot rent, lease, or sell the listed property for 12 months after completion of the listed work.



Signature of Owner/Contractor

4/30/2025

Date