

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	ential
SITE ADDRESS: 16 South Brenda St Spring	1390 PIN:
LANDOWNER: Brenda McLaushin Mailing Addre	
City: Spring Lake State: M Zip: 28390 Phone: 910-D29-062/ Email: b) Cemac 8319 9 gmail - Com	
JOB COST (required): \$6600	
DESCRIPTION OF WORK: Deplace 200 amp Cutdows	main Parel and 200 amp feeder
Mechanical: New Unit With Ductwork □ New Unit Without Ductwork □ Gas Piping □ Other	
Electrical: 200 Amp ☐ Greater than 200 Amp ☐ Service Chan	ge Service Reconnect Other
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.	
Viva Electric Enterprises Contractor's Company Name	$\frac{919 - 820 - 2351}{\text{Phone}}$
1211 Ireland de Faretteville Nr. 28304	andrew. Edward & Call Nubine. Com
L.29802-03 License #	Email
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.	
1/W/	5-27-25
Signature of Owner/Contractor	Date