

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: 124 Haywood St	PIN:
LANDOWNER: Nordaine Smellie Mailing Address:	
City: Spring 4ke State: NC Zip: 28390 Phone: 570-656-839 Email:	
JOB COST (required): 1150	
DESCRIPTION OF WORK: Installing electric Vehicle	cirwit
Mechanical: New Unit With Ductwork □ New Unit Without Ductwo	rk Gas Piping Other
Electrical: 200 Amp Greater than 200 Amp Service Chan	ge □ Service Reconnect □ Other <u>F</u> ✓
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.	
Pine Green Electric LLL Contractor's Company Name	910-391- 60 46 Phone
4111- E Resc Lake or , charlotte, Nl, 28217	
Address	Email Pincgreen el ectric 2 g mail. com
L. 37294 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.	
S Rom	5/30/2025
Signature of Owner/Contractor	Date