



CentralPermitting@Harnett.org  
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420 McKinney Pkwy (physical)  
PO Box 65 (mailing)  
Lillington, NC 27546

## INDIVIDUAL TRADE APPLICATION

CONSTRUCTION TYPE (circle one): Residential Non-Residential

SITE ADDRESS: 173 Birch Ave Spring Lake 28390 PIN: \_\_\_\_\_

LANDOWNER: Michael Emmons Mailing Address: Same as above

City: Spring Lake State: NC Zip: 28390 Phone: 757-535-3799 Email: ~~MichaelEmmons@9365 Pro~~ MichaelEmmons@9365 Pro

JOB COST (required): \$850

DESCRIPTION OF WORK: Extend existing HVAC circuit to replace damaged wire

Mechanical: New Unit With Ductwork ☐ New Unit Without Ductwork ☐ Gas Piping ☐ Other \_\_\_\_\_

Electrical: 200 Amp ☐ Greater than 200 Amp ☐ Service Change ☐ 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 LLC  
Contractor's Company Name  
1211 Island Dr Fayetteville NC 28304  
Address  
629802-03  
License #

919-820-2351  
Phone  
Andrew.edwards@Callnabue.com  
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.

[Signature]  
Signature of Owner/Contractor

7-8-25  
Date