



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

INDIVIDUAL TRADE APPLICATION

CONSTRUCTION TYPE: Residential ☒ Non-Residential ☐

SITE ADDRESS: 142 Valley Brook Ln PIN: _____

LANDOWNER: Joel Costa Mailing Address: 142 Valley Brook Ln

City: Spring Lake State: NC Zip: 28390 Phone: 503-702-6667 Email: joel.costa3@gmail.com

JOB COST (required): \$300.00

DESCRIPTION OF WORK: Adding a 50 amp circuit on subpanel with receptical in garage, (14-50 NEMA).

Mechanical: New Unit With Ductwork ☐ New Unit Without Ductwork ☐ Gas Piping ☐ Other _____

Electrical: 200 Amp ☐ Greater than 200 Amp ☐ Service Change ☐ Service Reconnect ☐ Other Add 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.

Joel Costa (owner)
Contractor's Company Name
142 Valley Brook Ln, Spring Lake, NC, 28390
Address
Owner
License #

503-702-6667
Phone
joel.costa3@gmail.com
Email

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

Contractor's Company Name
Address
License #

Phone
Email

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

26 AUG 25
Date