

INDIVIDUAL TRADE APPLICATION

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

CONSTRUCTION TYPE: Residential Mon-Residential Mon-Residential	
SITE ADDRESS: 1539 Langdon Rel Angie	2750 PIN:
LANDOWNER: Margarita Gonzalez Castil Mailing Address: 1539 Langdon Rd	
City: Angler State: UC Zip: 27501 Phone: 919 706 6868 Email: gonzaleznoemy 20@ hotmail	
JOB COST (required):	
DESCRIPTION OF WORK: Install New electrical Box	
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
Plumbing: Water Tap/Sewer Connection □ Water Heater □	Number of Fixtures Other
CONTRACTOR INFORMATION	
* Must be owner or licensed contractor. Address, company name	
Margarita Gonzalez Castillo Contractor's Company Name	919 766-6868 Phone Gonzaleznoemy 20@ hotmail.cor
1539 langdon Rd Angier, UC 27501 Address	gonzaleznoemy 20@ hotmail.cor
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.	
and dele	08/29/2025
Signature of Owner/Contractor	Date