

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

INDIVIDUAL TRADE APPLICATION

CONSTRUCTION TYPE: Residential ☐ Non-Residential ☐	25326
SITE ADDRESS: 31 Commodore Ct. Caner	on NC PIN:
SITE ADDRESS: 31 Commodore Ct. Cameron NC PIN:	
City: Carreron State: NC Zip: 28326 Phone: 336-549-0105 Email:	
JOB COST (required): 2,000	FU Character side of house
DESCRIPTION OF WORK: MStall 100ap Circuit For	Ly Crarger on side of reme
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>FV Ch</u> arg
Plumbing: Water Tap/Sewer Connection □ Water Heater □	Number of Fixtures Other
CONTRACTOR INFORMATION	
* Must be owner or licensed contractor. Address, company name	e & phone must match information on license.
Transform Flectric LLC	Phone Hransformelectric nc agnail-con Email
Transform Electric LLC Contractor's Company Name 6336 Pawling Ct. Fayetteville NC 28904	Phone
6336 Pavling Ct. Fayetteville NC 28904	transformelectric nc (agrhail-con
Address	Email
<u>T.</u> 36283 License #	
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, leaffirm 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.	i a
Wyllen	09/18/25
Signature of Owner/Contractor	 Date