Harnett COUNTY NORTH CAROLINA

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 ☐

SITE ADDRESS: 56 Stone wheel Drive Sanford NC **PIN:** _____

LANDOWNER: Craig Ciotta Mailing Address: 56 Stonewheel Dr

City: Sanford State: NC Zip: 27330 Phone: 919 791-3795 Email: craigciotta@charter.net

JOB COST (required): 956.66

DESCRIPTION OF WORK: Install a circuit for a dehumidifier.

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.

M.R. Stoner Electric, Inc. — Contractor's Company Name

(919) 774-8877 — Phone

3216 Hawkins Ave Sanford NC — Address

elaine@mrstonerelectric.com — Email

23150-U — 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.

Craig Ciotta — Signature of Owner/Contractor

10-2-25 — Date