



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: 55 JR MACKLEY LN CAMERON NC PIN: _____

LANDOWNER: William + Sara Flint Mailing Address: 55 JR MACKLEY LN

City: Cameron State: NC Zip: 28326 Phone: 910 638 8245 Email: SARAFLINT@SCARECROWTRADING.COM

JOB COST (required) \$1,000.00

DESCRIPTION OF WORK: Electrical Box, 1 Light, 1 switch, 1 outlet

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.

Salmon Electric
Contractor's Company Name
4376 Hillman Grove Rd Cameron NC 28326
Address
23259 SPSFD
License #

910-690-5125
Phone
DRSalmonelectric@gmail.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.

Sara Flint
Signature of Owner/Contractor

10/19/2025
Date