

420 McF

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: 28 Ravens Wood Circle PIN:
LANDOWNER: Udm Smith Smid Smily Mailing Address: 20 Parent Wood
City: Sanford State: NC Zip: 27332 Phone: 910.797-2024 Email: perm 17th of towhihmeeleumic.
JOB COST (required):
DESCRIPTION OF WORK: In Mul me 20 amp dedicated circuit
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.
Ouchine 900 901 1864
Contractor's Company Name Phone Phone  Phone  Permitting touchmoneuturic com  Email
77673 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.
Signature of Owner/Contractor Date