Application #\_MRESK10-000

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.hamett.org/permits

Certification of Work Performed By Owner/Contractor (Individual Trade Application) Owner (s) of Structure: Owner (s) Mailing Address: 15 Land Owner Name (s): \_\_\_ Phone: Some Construction or Site Address: 15 0045-04-5122 Description of Work to be done In Stable Stub crox Mechanical: New Unit With Ductwork \_\_\_\_ New Unit Without Ductwork \_\_\_\_ Gas Piping Other Electrical\*; 200 Amp <200 Amp \_Service Change \_\_\_\_ Service Reconnect \* For Progress Energy customers we need the premise number Plumbing: Water/Sewer Tap \_\_\_ Number of Baths \_ Water Heater Specific Directions to Job from Lillington:

(Contractors Name)

(Trade)

I am the building owner or my NC state license number is 31456, which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations.

Contractor's Company Name
(688 Main St Wilson Mills
Address

Telephone

Acar melle Psubur banpro pane. (Off
Email Address

labor on this structure.

31456 License #

Subdivision:

Structure Owner / Contractor Signature:

By signing this application you affirm that you have obtained permission from the above listed license holder to purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or sell the listed property for 12 months after completion of the listed work.

\*Company name, address, & phone must match information on license