

Application # _____

Harnett County Central Permitting

PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.harnett.org/permits

Certification of Work Performed By Owner/Contractor (Individual Trade Application)

Owner (s) of Structure: RUSSELL GILCHRIST Phone: 919-499-2514

Owner (s) Mailing Address: 21037 NC HWY 24/27
CAMERON NC 28326

Land Owner Name (s): RUSSELL GILCHRIST Phone: 919-499-2514

Construction or Site Address: 21037 NC HWY 24/27 CAMERON NC

PIN # _____ Parcel # _____

Job Cost: \$150.00 Description of Work to be done RUN APPROX 20 FEET OF GAS TIED IN FROM EXSITING LINE AND PIPE OUT TO GENERATOR.

Mechanical: New Unit With Ductwork ___ New Unit Without Ductwork ___ Gas Piping Other ___

Electrical*: 200 Amp ___ <200 Amp ___ Service Change ___ Service Reconnect ___ Other ___
* For Progress Energy customers we need the premise number

Plumbing: Water/Sewer Tap ___ Number of Baths ___ Water Heater ___

Specific Directions to Job from Lillington:

Subdivision: _____ Lot #: _____

I MIKE E DENNING will provide the GAS PIPING labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 21095, 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.

DIXIE DENNING LP GAS MIKE E DENNING
Contractor's Company Name
PO BOX 517 705 S WALL ST BENSON NC
Address
21095
License # _____

919-894-3824
Telephone
JEN473DIXIE@YAHOO.COM
Email Address

Structure Owner / Contractor Signature:  Date: 1-24-19

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**