

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: James Aldredge Phone: 937-926-0252

Owner (s) Mailing Address: 271 Electric Ln
Sanford NC 27332

Land Owner Name (s): Same Phone: _____

Construction or Site Address: Same

PIN # _____ Parcel # _____

Job Cost: 6799.72 Description of Work to be done Generator, and water heater
install, plus Gas line

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 Blossman Gas will provide the Gas labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 23410, 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.

Blossman Gas
Contractor's Company Name
2221 S. Heron Blvd. Sanford NC
Address
23410
License #

919-775-3013
Telephone
Sanford@BlossmanGas.com
Email Address

Structure Owner / Contractor Signature: [Signature] Date: 3-21-19

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**

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Owner (s) Mailing Address: 271 Electric Ln
Sanford, NC 27332

Land Owner Name (s): same Phone: _____

Construction or Site Address: Same

PIN # _____ Parcel # _____

Job Cost: 1000 Description of Work to be done _____
Gnerator Installation

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 Jason Howard will provide the Electrical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 15793-L, 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.

JS Howard Electrical
Contractor's Company Name
2514 Dogwood St; Sanford, NC 27332
Address
15793-L
License # _____

919-774-1650
Telephone
erin.jshoward@windstream.net
Email Address

Structure Owner / Contractor Signature:  Date: 3/20/19

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**