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: Trank Barlow Phone: 919-895-1150
Owner (s) Mailing Address: 320 FATTAX Dr. SANFORD NC
Land Owner Name (s):Phone:  Construction or Site Address:
PIN # Parcel #
Job Cost: 537.04 Description of Work to be done Install Rinnai mater heater, Rinning  GAB line For mater heater
Mechanical: New Unit With Ductwork New Unit Without Ductwork Gas Piping X 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 #:
(Contractors Name) will provide the GAS PIPM labor on this structure.
I am the building owner or my NC state license number is, which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all
Blossman Gas   will provide the Gas piony   labor on this structure. (Contractors Name)   I am the building owner or my NC state license number is 3340   , which entitles me to
I am the building owner or my NC state license number is
I am the building owner or my NC state license number is
Blooman Gas   will provide the   Gas promy   labor on this structure. (Contractors Name)   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.    All School Sandal N. 21330   Fig. 149   Telephone   Fig. 140   Blossman Gas   Email Address   Email

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

Fixit plumbing # 15229 919-776-2839 Lee Ave #C SANFORD NC 27330