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)

	RICHARD AND BONNIE JOHNSON	Phone: 919-902-9036 910-709-1264
Owner (s) Mailing Addr	ress: 269 WATER EDGE DRIVE	
,,,,,,,	ERWIN NC	
and Owner Name (s):	RICHARD AND BONNIE JOHNSON	Phone: 910-709-1264 919-902-9036
Construction or Site Ad	ddress: 269 WATER EDGE DRIVE	
Job Cost: \$470.00	_Description of Work to be done_S	ET 250 TANK RUN APROX 35 FEET OF GAS LINE
TO GENERATOR AND T	TIE INTO EXSTING GAS LINE FOR LO	OGS.
Mechanical: New Uni	it With Ductwork New Unit Wit	thout Ductwork Gas Piping Other
	p <200 Amp Service Chan ogress Energy customers we need	ge Service Reconnect Other the premise number
Plumbing: Water/	/Sewer Tap Number of Ba	ths Water Heater
Specific Directions to J	ich from Lillington:	
Specific Directions to 5	OD HOM Emiligion.	
Subdivision:		Lot #:
MIKE E DENNING	will provide the GAS PIPIN	IG labor on this structure.
(Contractors N	vame)	(Trade) labor on this structure.
am the building owner	vame) r or my NC state license number is	21095 , which entitles me to
am the building owner	vame) r or my NC state license number is	21095 , which entitles me to
(Contractors in I am the building owner perform such work on t	vame) r or my NC state license number is	21095 , which entitles me to k shall comply with the State Building Code and a
(Contractors in I am the building owner perform such work on to other applicable State a	r or my NC state license number is the above structure legally. All wor and local laws, ordinances and reg	21095 , which entitles me to k shall comply with the State Building Code and a
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I am the building owner perform such work on to other applicable State and DIXIE DENNIG LP GAS Contractor's Company	name) or or my NC state license number is the above structure legally. All wor and local laws, ordinances and reg MIKE E DENNING	21095 , which entitles me to rk shall comply with the State Building Code and a sulations.
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*Company name, address, & phone must match information on license

Need electrical info - I permit I emailed Truinforzoning Permit.

the listed property for 12 months after completion of the listed work.



Zoning Application & Permit Planning & Inspections Department

Pern	nit#
	-

Each application should be submitted with an attached plot/site plan with the proposed use/structure showing lot shape, existing and proposed buildings, parking and loading

Name of Applicant D	xit Demin	Property Owner	0-1-1
Home Address		Property Owner	Richard Johnson
City, State, Zip		. Home Address	104 man Aire
Telephone		City, State, Zip	Emin M 28317
Email		Telephone	
		Email	
Address of Proposed Propert	ty 269 wa	ter 1711- 0	
Parcel Identification Number	(s) (PIN)	000	4
What is the applicant request	ing to build (t	8 33 9. 000 Estimat	ed Project Cost
he proposed use of the subje	ct property? Be specific	Set 250 tank	Jan Tie + sen
escription of any proposed imp	Tovements	and 1045.	
MIE DUMUINE OF Promorts	1	5	
hat was the Previous Use of	the subject property?	1000	0.000
oes are 110helly Woobse DO.	Troad?	148	Residential
umber of dwelling/structure	s on the property already		ty/Parcel size 35
opupiain SPHA Nes 1	No SALLES	The state of the s	
UST circle one that applies to p	roperty Existing/Propos	ed Sentic System	es \(No
	Existing/Propos	ed County/City Sewer	Or
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