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: ROLD (TO)	Phone: (910) 9844102				
Owner (s) Mailing Address: 14 8 50 1000	iono wington				
Land Owner Name (s):	Phone:				
Construction of City Address					
PIN'#Parcel #					
Job CostDescription of Work to be done					
Mechanical: New Unit With Ductwork New Unit Without Ductwork Service Change S	vice Reconnect Other				
Plumbing: Water/Sewer Tap Number of Baths Water Heater					
Specific Directions to Job from Lillington:	,				
Subdivision:Lot:	#:				
KPN+T(NN) wi provide the labor on this structure. (Confractors Name) (Trade)					
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 comp	bly with the State Building Code and all				
other applicable State and local laws, ordinances and regulations.					
Contractor's Company Name	910\897550] Telephone				
Address # License #	Email Address				
Structure Owner / Contractor Signature:	Date: 0 15 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

Application #	

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Owner (s) of	Structure:	Rolariti	COLLOS	Р	hone: (910) 9844103
Owner (s) Ma	iling Address:	148: 50	uppernar	ng i	and willington
Land Owner	Vame (s):			P	hone:
		s;			
Job Cost:	Des	cription of Work	to be done		
	- ,	,			Gas PipingOther
Electrical*:	* For Progress	Energy custom	Service Change ers we need the pr	_ Service remise nui	Reconnect Other
Plumbing:	Water/Sewe	rTapN	lumber of Baths	Wa	ter Heater
Specific Direct	tions to Job fro	m Lillington:		22	
•					
Subdivision: _				_Lot #: _	·
I TOMY	MI DO!	will provide the	ne_ - Pll((Trade)	labor on this structure.
I am the building	ng owner or my	y NC state licens	se riumber is	14911	, which entitles me to
perform such v	work on the ab	ove structure leg	gally. All work shall	comply w	ith the State Building Code and all
other applicabl	e State and lo	cal laws, ordinar	nces and regulation	IS.	
Contractor's Co	ompany Name			- ;	910) 237-159U
Address O UCI	1000	un st (. 00, (3	- i	Email Address
License #	2001		1 6	11	1 fee
Structure Owner	er / Contractor	Signature:	100	17/1	Date: 10 15 10
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