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: hastoplas Spinson Phone: 919-414-0952
Owner (s) Mailing Address: 319 Tulorstone Deve
Francy Varion IN 27526
Land Owner Name (s): Shulo Phone:
Construction or Site Address: SAWA
PIN # Parcel #
Job Cost: 6876 Description of Work to be done Change Out hoat aug
At R handler Chael/outdook
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: NOTO Lette MCKING PYWY WHO IS LUCIN WISH COLORANGE PYWY WHO TO US LUCIN WISH COLORANGE PYWY WHO TO US LUCIN WISH COLORANGE PYWY WHO TO US LUCINO WISH COLORANGE PYWY WHO TO US LUCINO WISH COLORANGE PYWY WHO TO US LUCINO WISH COLORANGE PYWY WHO WAS A WAY WOUNTED TO US LUCINO WISH COLORANGE PYWY WHO WAS A WAY WOUNTED TO US LUCINO WISH COLORANGE PYWY WHO WAS A WAY WOUNTED TO US LUCINO WISH COLORANGE PYWY WHO WAS A WAY WOUNTED TO US LUCINO WISH COLORANGE PYWY WHO WAS A WAY WOUNTED TO US LUCINO WISH COLORANGE PYWY WHO WAS A WAY WOUNTED TO US LUCINO WISH COLORANGE PYWY WHO WAS A WAY WOUNTED TO US LUCINO WISH COLORANGE PYWY WHO WAS A WAY WOUNTED TO US LUCINO WISH COLORANGE PYWY WHO WAS A WAY WOUNTED TO US LUCINO WISH COLORANGE PYWY WHO WAS A WAY WOUNTED TO US LUCINO WISH COLORANGE PYWY WHO WAS A WAY WOUNTED TO US LUCINO WAS A WAY WHO WAS A WAY WHO WAS A WAY WOUNTED TO US LUCINO WHO WAS A WAY WHO WAS A WAY WHO WAS A WAY WOUNTED TO US LUCINO WHO WAS A WAY WAS A WAY WHO WAS A WAY WAS A WA
Subdivision:Lot #:
(Contractors Name) will provide the Hoch / Elect labor on this structure.
I am the building owner or my NC state license number is OHUPIL, 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.
Contractor's Company Name Contractor's Company Name Telephone Is known you the opport Company Name To the post of Road To the post
License #
Structure Owner / Contractor Signature: Date: 040
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

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

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