

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: Dorangelica Marcos Phone: 919 258 5109

Owner (s) Mailing Address: 216 Oma Kelly Rd
Broadway NC 27505

Land Owner Name (s): SAME Phone: _____

Construction or Site Address: _____

PIN # _____ Parcel # _____

Job Cost: 550.00 Description of Work to be done Gas line for new gas Range

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 Piping labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 34846, 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 & Appliance
Contractor's Company Name

919 775 3013
Telephone

2221 S. Horner Blvd Sanford NC 27330
Address

Wmay@Blossmangas.com
Email Address

34846
License #

Structure Owner / Contractor Signature:  Date: 6-12-2020

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**