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Application #_

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.hamett.org/permits Certification of Work Performed By Owner/Contractor (Individual Trade Application)

Owner (s) of Structure:	JOSH BAKER	Phone:
Owner (s) Mailing Addre	ess: 29 ALBAN ROW FUQUAY VA	RINA, NC
Land Owner Name (s):	JOSH BAKER	Phone:
Construction or Site Add	dress: 29 ALBAN ROW FUQUAY	/ARINA, NC
		1#
Job Cost: 1000.00 POOL/SPA HEATER	Description of Work to be done	RUNNING APPROX 30' OF LP LINE FROM TANK TO
Mechanical: New Unit	With Ductwork New Unit \	Nithout Ductwork Gas Piping ✓ Other
	<200 Amp Service Ch gress Energy customers we nee	ange Service Reconnect Other ed the premise number
Plumbing: Water/S	Sewer Tap Number of I	Baths Water Heater
Specific Directions to Jo	b from Lillington:	
Subdivision:		Lot #:
	(5)	(Trade) labor on this structure.
I am the building owner	or my NC state license number	is 21095 , which entitles me to
perform such work on th	ne above structure legally. All w	ork shall comply with the State Building Code and all
other applicable State a	nd local laws, ordinances and r	egulations.
DIXIE-DENNING SUPPLY	′ CO	919-894-3824
Contractor's Company N	Name	Telephone
705 S WALL STREET BE	NSON , NC 27504	maria.dixiedenning@gmail.com
Address 21095	_	Email Address
License #	actor Signature: W. J.	Pate: 5/14/2021
Structure Owner / Contr By signing this application	on you affirm that you have obt	ained permission from the above listed license holder to

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

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