Application #		
Application #	 	

Harnett County Central Permitting
PO Box 65 Lillington, NC 27548 - 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:	Kinh	ubin	Ph	one: 7009	3030274
Owner (s) Mailing Address	1001	2 ich Mond	fark D	۲.	
	Carror	1, NC 28	3210		
Land Owner Name (s):			Ph	one:	
Construction or Site Add	1001 1000				
PIN #		Parcel # _			
Job Cost: 4 10739	Description of Wo	ork to be done	raulsp	ace	
Mechanical: New Unit	With Ductwork_	_ New Unit With	out Ductwork_	✓ Gas Piping	Other
Electrical*: 200 Amp	<200 Amp _ gress Energy cust	_ Service Change omers we need th	e Service ne premise num	Reconnect nber	Other
Plumbing: Water/S	ewer Tap	Number of Bath	s Wat	ter Heater	
Specific Directions to Jo	b from Lillington:				
Subdivision:			Lot#:		
Vanle Gust	will provid	e the EUCH	(Trade)	labor on thi	
I am the building owner					
perform such work on th				vith the State Bu	ilding Code and all
other applicable State a	nd local laws, ord	inances and regu	ations.		
VDA Slock	ViC.			919351	0.2225
Contractor's Company	lame			Telephone	
WADI KEEL	SIDY	N. A. C.		-	
Address 32452				Email Address	•
License #			.4.		
Structure Owner / Contro					2/28/27
By signing this application purchase permits on the the listed property for 12	ir behalf. If doing	the work as owne	er you understa	from the above I and that you car	isted license helder t nnot rent, lease or se

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

Analisation 44	
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) Phone: Owner (s) of Structure: Owner (s) Mailing Address: Phone: Land Owner Name (s): Construction or Site Address: Parcel # PIN# Description of Work to be done WAWISPALE -Gas Piping New Unit Without Ductwork Mechanical: New Unit With Ductwork \_\_ Service Change \_\_\_ Service Reconnect \_\_\_ Other \_\_ 200 Amp <200 Amp Electrical\*: \* For Progress Energy customers we need the premise number Water Heater Number of Baths \_\_ Plumbing: Water/Sewer Tap \_ Specific Directions to Job from Lillington: Lot #: Subdivision: labor on this structure. will provide the (Trade) I am the building owner or my NC state license number is 28280, 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

232 Will SON Rd - Vanford

Address

998903600 Telephone

Email Address OMA

License #

Structure Owner / Contractor Signature:

By signing this application you affirm that you have obtained permission from the above listed license helder 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