Applicatio	n #		

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:	Glenda Adams	Phone: 917	7-756-7411
Owner (s) Mailing Addre	ess: 206 Crystal Springs Dr		
Owner (b) Maining / laure	Sanford, NC 27332		
Land Owner Name (s):	Glenda Adams	Phone: 917	7-756-7411
Canada owner marrie (s).	Glenda Adams dress: 206 Crystal Springs Dr Sanford	NC 27332	
Construction of Site Add	iless.	and the state of t	
PIN #	Parcel #		
Job Cost: 1000	_Description of Work to be done_se	t tanks and run line for fire	place
Mechanical: New Unit	t With Ductwork New Unit With	hout Ductwork Ga	s Piping <u></u> Other
Electrical*: 200 Amp	<200 Amp Service Chang gress Energy customers we need to	ge Service Reconr the premise number	ect Other
Plumbing: Water/S	Sewer Tap Number of Bat	hs Water Heat	er
Specific Directions to Jo	ob from Lillington:		
Subdivision:		Lot #:	
	will provide the Gas piping ame)		
I am the building owner	or my NC state license number is	33164 ,	which entitles me to
perform such work on the	he above structure legally. All worl	k shall comply with the	State Building Code and all
other applicable State a	and local laws, ordinances and regu	ulations.	
Blossman Gas		919-775	-3013
Contractor's Company	Name	Telepho	one
2221 South Horner Blvd			blossmangas.com
Address		Email A	ddress
33164	_		
License #			
Structure Owner / Cont	ractor Signature: A A		Date:_8-17-22
By Sidillid tills applicat	ion you affirm that you have obtain eir behalf. If doing the work as owr	ca pointillooion nom and	above listed license holder to 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.