Application #

PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 91 Certification of Work Performed By ((Individual Trade Application)	0-893-2793 - www.hamett.org/permits Owner/Contractor ation)
Owner (s) of Structure: KATHERYN TRAVIS Owner (s) Mailing Address: 266 Josey Willims	Phone: 919-454-4128
-NW. NC 28339	
Land Owner Name (s):	Phone
7. 1.10 / 100	
Parcel #	
Job Cost: 900.00 Description of Work to be done Set 120 Line for Logs No TRENChing	That O were as
Mechanical: New Unit With Ductwork New Unit Without Duct	work Gas PipingOther
Electrical*: 200 Amp <200 Amp Service Change Service Chang	se number
Plumbing: Water/Sewer Tap Number of Baths	Water Heater
Specific Directions to Job from Lillington:	
Subdivision:Lot	#:
(Contractors Name) will provide the Mechanical	labor on this structure.
am the building owner or my NC state license number is 3145	which entitles me to
perform such work on the above structure legally. All work shall com-	ply with the State Bullding Code and all
other applicable State and local laws, ordinances and regulations.	
Suburban Progane	919-556-3143
LODS MAIN ST ROLESVILLE NC 2757)	Telephone
Address 31456 License #	Email Address Con
Structure Owner / Contractor Signature: Washe Land	Date: <u>/Z - 22 - 22 - </u>
By signing this application you affirm that you have obtained permission purchase permits on their behalf. If doing the work as owner you under the listed property for 12 months after completion of the listed work.	

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