## 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:	esse witt	_Phone:
Owner (s) Mailing Address:	453 CAROLINA WAY	
	SAWford NC 27332	
Land Owner Name (s):		_Phone:
Construction or Site Addres	ss:	
PIN #	Parcel #	
Job Cost: \$9350,00 De	escription of Work to be done Chaws	cout heatpump.
Mechanical: New Unit Wi	ith Ductwork New Unit Without Ductw	ork Gas Piping Other
Electrical*: 200 Amp * For Progres	_<200 Amp Service Change Se ss Energy customers we need the premise	rvice Reconnect Other e number
Plumbing: Water/Sew	ver Tap Number of Baths	Water Heater
, ,	From Lillington: Buffalo Lake Rd. turn ina Lakes Rd. guto stops I eft.  va Lakes Lot	#-
		N. SANFORDINC 27332
(Contractors Nam	will provide the Electrical (T	rade)
I am the building owner or	my NC state license number is 2363	, which entitles me to
perform such work on the	above structure legally. All work shall con	nply with the State Building Code and all
other applicable State and	local laws, ordinances and regulations.	
Christopher S. Contractor's Company Nat 3214 CAROLINA Address 25 874	me 1 1 1 2000	(919) 721-6321 Telephone Chrisscott edwards@gahoo.com Email Address
License #  Structure Owner / Contract	tor Signature: All Markets Signature: All Mar	Janu Gar Date: 8-25-23
By signing this application purchase permits on their	you affirm that you have obtained permis	sion from the above listed license holder to derstand that you cannot rent, lease or sell

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