| Application # | |
|---------------|--|
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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: | | Phone: | | |
|--|---|---------------------------|---|------------|
| Owner (s) Ma | | | | |
| Land Owner Name (s): | | | Phone: | |
| Construction | or Site Address: | | | |
| | | | | |
| Job Cost: | Description of | Work to be done | | |
| Mechanical: | New Unit With Ductwork | | ıt Ductwork Gas Piping Other | |
| Electrical*: | 200 Amp <200 Amp * For Progress Energy c | | Service Reconnect Other premise number | _ |
| Plumbing: | Water/Sewer Tap | _ Number of Baths _ | Water Heater | |
| Specific Dire | ctions to Job from Lillingto | | | |
| Subdivision: | | | Lot #: | |
| I will provide the (Contractors Name) | | | labor on this structure (Trade) |) <u>.</u> |
| I am the building owner or my NC state license number is | | , which entitles me to | 0 | |
| perform such | n work on the above struct | ure legally. All work sha | nall comply with the State Building Cod | e and all |
| other applica | ble State and local laws, o | ordinances and regulation | ions. | |
| Contractor's Company Name | | Telephone | | |
| Address | | | Email Address | |
| License # | | | | |
| Structure Ow | vner / Contractor Signature | : Lori Sellers | Date: | |

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