Processed

Application # MRES 2405-0026

Harnett County Central Permitting
420 McKinney Pkwy / PO Box 65 Lillington, NC 27546 – centralpermitting@harnett.org
Ph.: 910-893-7525 - Fax: 910-893-2793 / www.harnett.org/permits Certification of Work Performed By Owner/Contractor (Individual Trade Application)

| Owner (s) of                                      | Structure: Thomas + ANN D  | emacce Phone:   |
|---|--|---|
| Owner (s) Ma                                      | alling Address: 30 Wispy Will  |   |
|   | Sanfald N.   |   |
| Land Owner  | Name (s):  | Phone:  |
| Construction                                      | or Site Address:   |   |
| PIN#  |  | rcel#   |
| Job Cost (Re                                      | equired):\$5747.976 escription of Work   | to be done Changeout upstrikes  |
| Mechanical:                                       |  | nit Without Ductwork V Gas Piping Other   |
| Electrical*:                                      | * For Progress Energy customers we   | Change Service Reconnect Other  need the premise number                                       |
| Plumbing:   | Water/Sewer Tap Number   | of Baths Water Heater   |
| Specific Direc<br>TAYE 24<br>Jeft . go<br>3190 98 | ctions to Job from I illington: 1/27 TO Pulfalo LAKES K e to step sisu turnelicul approx I In 75 to whis 1864.   | On Checking with Then Left At acxt stope on wispy willow house on Right.                      |
| Subdivision: _                                    |  | Lot #:  |
| am the buildi                                     | ten Electrica will provide the Electronic Name) ling owner or my NC state license number work on the above structure legally. Ale ole State and local laws, ordinances and | per is 23639L , which entitles me to I work shall comply with the State Building Code and all |
|   |  | [1] [2] [1] [2] [2] [2] [2] [2] [2] [2] [2] [2] [2  |
| 32/4 CH   | Company Name HADINA WAY  | 1919) 721-5321 Telephone Cheisscottedwards@gahoo.com Email Address                            |
| 35874<br>dicense #                                | /  | dellel  |
| tructure Own                                      | ner / Contractor Signature: // // // // // // // // // // // // //   | Date: 9 77 5  |

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 Faxed or Mailed application could have an approximately 1-5 day process time