		그렇게 하는 사람들이 되었다. 그는 사람들은 사람들이 되었다면 하는 것이 되었다면 하는 것이 없었다.
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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 Struc	cture: 6	etali	mana	<u> </u>	none: (910)8913425		
Owner (s) Mailing	Address:	224]	- sun	Dr. COO	ts NC 29521		
Land Owner Name (s):					Phone:		
Construction or S	ite Address						
PIN #			Parcel	#			
Job Cost: \$6000		cription of vvo	ork to be done				
Change out and red	Connection		THE RESERVE AND THE PROPERTY OF THE PARTY OF				
					Gas Piping Other		
	The second secon			ange Serviced the premise no	e Reconnect Other umber		
Plumbing: V	Vater/Sewe	er Tap	Number of E	Baths W	ater Heater		
Specific Direction	ns to Job fro	om Lillington:					
Subdivision:				Lot #:			
Tommy Patrick		will provi	de the Electrica	al	labor on this structure.		
(Contra	ctors Name)		(Trac			
I am the building	owner or	ny NC state I	icense numbe	r is 4910u	, which entitles me to		
					y with the State Building Code and all		
other applicable	State and	local laws, or	dinances and	regulations.			
Patrick Elec.					9102371594		
Contractor's Cor	mnany Mar	00			Telephone		
1309 N. Main Lillin		10			Jasminelloyd@centurylink.net		
Address					Email Address		
4910u							
License #	TO SELECTION OF THE PARTY OF TH						
Structure Owner	/ Contract	or Signature			XJZ Date: Colle125		
		-//		tained permissi	on from the above listed license holde		
	s on their t	behalf. If doin	ig the work as	owner you unde	erstand that you cannot rent, lease or s		

Application #	£	
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Harnett County Central Permitting

Mailing Address - PO Box 65 Lillington, NC 27546 - Physical Address - 420 McKinney PKWY Lillington NC 27546
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 St	ructure: be	Summas		Phone: (910)	897-2455
Owner (s) Maili		224 Irleno		The state of the s	
Land Owner Na	ame (s):			Phone:	
Construction or	Site Address:				
PIN#		Parcel #_			
Job Cost (Requ		Description of Work to be de lecante	one C	Manck Ott	t package Hp/
Mechanical: N	lew Unit With Duc	twork New Unit Witho	ut Ductwork	Gas Piping	Other
	00 Amp <200 For Progress Ene	AmpService Change rgy customers we need the	Service premise nu	e Reconnect \	Other
Plumbing:	Water/Sewer Tap	Number of Baths	W	ater Heater	
Specific Directio	ns to Job from Li	lington:			
Subdivision:			Lot #: _		
1_Kents	CMS(M) water	ill provide the	(Trade	#프루스 : - '' '	s structure.
I am the building	g owner or my NO	state license number is	1716L	, which en	titles me to
perform such we	ork on the above	structure legally. All work s	hall comply	with the State Bu	ilding Code and all
other applicable	State and local I	aws, ordinances and regula	tions.		
166 -+	andlethe	2		Carno	DCITECTI
Contractor's Co	mpany Name			Telephone	
124	TUNINGHO	nedouna		-JUSMOW	ulucia.
Address				Email Address	Cennul Inne net
License #	14	1		1111	CONNOUNCE CO
License #		1//11		J x · ·	
Structure Owner	r / Contractor Sig	11/1/22	1/1	Date:	0/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1
By signing this appli	ication, you affirm that	you have obtained permission fr	om the above l	isted license holder to	purchase permits on their

*Company name, address, & phone must match information on license Faxed or Mailed application could have an approximately 1-5 day process time

listed work.