

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: Par 5 Development Phone: 910 944 9881

Owner (s) Mailing Address: 2035 Stripper Creek Lake Rd.,
West End, NC 27576

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: 8909 US 401 Fugate Vartha

PIN # _____ Parcel # 0654-51-3127

Job Cost: 13,000 Description of Work to be done Plumbing Estimate

Mechanical: New Unit With Ductwork New Unit Without Ductwork Gas Piping Other

Electrical*: 200 Amp <200 Amp Service Change Service Reconnect Other

* For Progress Energy customers we need the premise number

Plumbing: Water/Sewer Tap Number of Baths Water Heater

Specific Directions to Job from Lillington:

2 Sinks, 2 commodes, 1 water heater, 1 water cooler
1 mop sink

Subdivision: _____ Lot #: _____

I Matts Plumbing will provide the Plumbing labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 28792, which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations.

Matts Plumbing and Repair
Contractor's Company Name

910 730 4197
Telephone

1800 sandcrest Drive Rockingham NC
Address

mhaynes14@gmail.com
Email Address

28792
License #

Structure Owner / Contractor Signature: [Signature] Date: 8-20-19

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