Application	#	
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**Harnett County Central Permitting** 

PO Box 65 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)

(Individual Trade Application)

Owner (s) of Structure: CREENTICED COMMUNICATION Phone: \$19-
Owner (s) Mailing Address: 8601 SIX FORKS RD SEE 270 RAW 6H NC 27615
Land Owner Name (s):Phone:
Construction or Site Address: 32 RETREAT DRIVE FUDURY-LARINA
PIN # Parcel #
Job Cost (Required): 25,000 Description of Work to be done IRRIGATION SYSTEM
BACKFLOW PREDITER
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: 401 NORTH, LOW PINEY GROWE ROWS POR LOW SHEENITY WALK PKMY. LOW RETREAT
LOW SECENTIFY WALL FLOWY, LOW (CETTORY)
Subdivision: Seven in Lot #: N/A
Server LANDSCAPES   will provide the   (RINGATION   labor on this structure. (Trade)
I am the building owner or my NC state license number is, 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.
Contractor's Company Name  SE DIVIN MAGIC - BOBBY HUNT  Q19-369-5583  Telephone
Andrew DSENECA LANDSCAPES CON  Address  Email Address
<u>D1 - 23989</u> License #
Structure Owner / Contractor Signature:

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