

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: Mitchell E. Vaughn Jr Phone: 601 383 1089

Owner (s) Mailing Address: 33 Essex Ct west Sanford NC 27332

Land Owner Name (s): Mitchell E. Vaughn Jr Phone: 601 383 1089

Construction or Site Address: Same as above

PIN # _____ Parcel # _____

Job Cost: _____ Description of Work to be done: Sprinkler tap

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:

Subdivision: _____ Lot #: _____

I ~~Mitchell~~ Dell Haire Plumbing will provide the Plumbing labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 32886 P1, 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.

Dell Haire Plumbing 910 429 9939
Contractor's Company Name Telephone
620 Gallespie St Fayetteville NC 2836
Address Email Address
32886 P1
License #

Structure Owner / Contractor Signature: [Signature] Date: 5/31/19

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**