

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: Emond Brooks Phone: 941-962-7446

Owner (s) Mailing Address: 95 Meadow Springs Lane
Sanford NC 27332

Land Owner Name (s): Emond Brooks Phone: _____

Construction or Site Address: 95 Meadow Spring Lane Sanford, NC 27332

PIN # _____ Parcel # _____

Job Cost: _____ Description of Work to be done Outdoor Irrigation System

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: Buffalo Lake Rd left on Carolina Lakes Rd
Right onto Carolina way left onto Meadow Springs Rd.

Subdivision: _____ Lot #: _____

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

I am the building owner or my NC state license number is 20497, 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.

Conner Backflow Inc 919-606-3771
Contractor's Company Name Telephone
2209 Doran Place Raleigh NC 27604
Address Email Address
20497
License #

Structure Owner / Contractor Signature: [Signature] Date: 7.1.19

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