

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: MICHAEL + MAUREEN LAWSON Phone: 910-494-0901
919-592-8188

Owner (s) Mailing Address: 151 SEA MIST DR, SANFORD, NC 27332

Land Owner Name (s): MICHAEL + MAUREEN LAWSON Phone: (SAME)

Construction or Site Address: 151 SEA MIST DR. SANFORD NC 27332

PIN # _____ Parcel # _____

Job Cost: _____ Description of Work to be done SPRINKLER IRRIGATION

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: CAROLINA LAKES (Lakeside Manor) Lot #: 62

HOMEOWNER

I JAMES SPROUSE will provide the IRRIGATION / PLUMBING labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is #076, 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.

SAN LEE IRRIGATION HOMEOWNER
Contractor's Company Name

919-352-8107
Telephone

7806 VILLANDOW DR. SANFORD, NC
Address 27332

(jamessprouse@icloud.com)
Email Address

076
License #

Structure Owner / Contractor Signature: [Signature] Date: 8/6/00

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**