

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: Matthew Karas Phone: 919-616-1727

Owner (s) Mailing Address: 1415 Atkins Rd

Fuquay Varins, NC 27524

Land Owner Name (s): Matthew Karas Phone: 919-616-1727

Construction or Site Address: 1415 Atkins Rd

PIN # _____ Parcel # _____

Job Cost: 7,575 Description of Work to be done Outside replace 200 amp panel and low bay water heater replacement in crawlspace

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 Michael and Son will provide the electrical and plumbing labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 19962-01, 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.

Michael and Son Services
Contractor's Company Name

919-390-1094
Telephone

4001 Atlantic Ave Raleigh NC 27604
Address

Permitsac@michaelandson.com
Email Address

electrical) 19962-01 33791(plumbing)
License #

Structure Owner / Contractor Signature: [Signature] Date: 4/5/21

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**