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)

Owner (s) of Structure:	D804CAS 7ZA-1XIEY Phone: 910 391 1958
Owner (s) Mailing Addre	ss: 91 BLUE HERON CT
	SMAPOIDE MICH BISS
and Owner Name (s):	THUMAS PAMEY PAMEARAWET Phone: 910 391 7953
Construction or Site Add	ress: 235 VICKPILL Rd. SAMFORD N.C.
PIN#	Parcel #
Job Cost (Required): 5	wolfer closet (2)
EXISTIAL4 Mechanical: New Unit	With Ductwork New Unit Without Ductwork Gas Piping Other
* For Prog	<200 Amp Service Change Service Reconnect Other gress Energy customers we need the premise number
Plumbing: Water/S	Sewer Tap Number of Baths 2 Water Heater
Specific Directions to Jo	ob from Lillington: 235 VICKETTH RD.
Subdivision: Buffa	alo Lake Lot#: 4
DOUGLAS RAYNE (Contractors N	will provide the plumbing labor on this structure. (Trade)
am the building owner	or my NC state license number is, which entitles me to
perform such work on ti	he above structure legally. All work shall comply with the State Building Code and all
other applicable State a	and local laws, ordinances and regulations.
HOUGLAS PL	Name Ct. SAUFORD H.C. 27332 Telephone Toughs, Rainey & Honsey well. co.
Contractor's Company	Name Telephone Telephone
91 Blue Heroal	T. SAUFORD H.C. Doughs, Raine 4 (8) 178 nog wer.
Address	Émall Address
License #	- 100 0 / 100 1
Structure Owner / Cont	tractor Signature: 12-10-21
	tion 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