

Application # PRES2205-0015

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: Scott Coleman Phone: 931-538-8765

Owner (s) Mailing Address: 60 Clearview Ct.
Sanford NC 27332

Land Owner Name (s): SCOTT COLEMAN Phone: 931-538-8765

Construction or Site Address: 60 CLEARVIEW CT, SANFORD, NC 27332

PIN # _____ Parcel # 37

Job Cost: _____ Description of Work to be done _____

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 #: 81

I Jimmy Grant will provide the Plumber labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 32645, 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.

Grant Lawn & Sprinkler Services
Contractor's Company Name 28314

910-977-6036
Telephone

6839 Timber Coast Ln, Fayetteville N.C.
Address

Email Address

32645
License #

Structure Owner / Contractor Signature: Jimmy Grant Date: 28th May 2022

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**