Central permitting@harnett.org

Application #_____

Harnett County Central Permitting

Mailing Address - PO Box 65 Lillington, NC 27546 - Physical Address - 420 McKinney PKWY 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:	Wesley Neel	Phor	ne:9109846561	
	ess: 56 KING WOOD COL	IRT		
	1 - 1 - 2	28346		
Land Owner Name (s):	Wesley Stephanie Necl	Phor	ne: 910 984 656 [
Construction or Site Ad	dress: 56 KINGWOOD	COURT	ILLINGTON NE.	2754
	Parcel # _			
Job Cost (Required):	Description of Work to be o	done <u>Full S</u>	ervice Sprinkle	<u>'\</u>
Mechanical: New Uni	t With Ductwork New Unit With	out Ductwork	_ Gas Piping Other	_
	o<200 Amp Service Change ogress Energy customers we need th			
Plumbing: Water/	Sewer Tap Number of Bath	s Water	Heater	
Specific Directions to Ju	ob from Lillington:			
Subdivision:		Lot #:		_
I(Contractors N	will provide the	(Trade)	_ labor on this structure.	
I am the building owner or my NC state license number is, which entitles me to				
perform such work on t	he above structure legally. All work	shall comply with	n the State Building Code a	nd all
1 1	end local laws, ordinances and regulated (home owner)	ations.		
Contractor's Company	Name	Te	lephone	
Address		Er	nail Address	
License # Structure Owner / Cont	ractor Signature:) Date:	

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

Faxed or Mailed application could have an approximately 1-5 day process time