



CentralPermitting@Harnett.org
(910) 893-7525 ext:1
420 McKinney Pkwy (physical)
PO Box 65 (mailing)
Lillington, NC 27546

INDIVIDUAL TRADE APPLICATION

CONSTRUCTION TYPE (circle one): Residential Non-Residential

SITE ADDRESS: 39 GRADING STICK COURT PIN: _____

LANDOWNER: TONY SILVA Mailing Address: 39 GRADING STICK COURT

City: ANGIER State: NC Zip: 27501 Phone: 808 357 9744 Email: KEOVULO SILVA@GMAIL.COM

JOB COST (required): 10,000

DESCRIPTION OF WORK: SPRINKLER SYSTEM INSTALL

Mechanical: New Unit With Ductwork ☐ New Unit Without Ductwork ☐ Gas Piping ☐ Other _____

Electrical: 200 Amp ☐ Greater than 200 Amp ☐ Service Change ☐ Service Reconnect ☐ Other _____

Plumbing: Water Tap/Sewer Connection ☐ Water Heater ☐ Number of Fixtures _____ Other _____

CONTRACTOR INFORMATION

* Must be owner or licensed contractor. Address, company name & phone must match information on license.

DRAIN MAGIC INC
Contractor's Company Name
6029 WINTERION DRIVE
Address
23989 - P1
License #

919-369-5583
Phone
DRAINMAGIC@AOL.COM
Email

Mechanical change outs & generator applications require both electrical & mechanical information. If applicable:

NO DROUGHT
Contractor's Company Name
13429 OLD STAGE ROAD WILLO SPRINGS
Address
1362
License #

919-622-2884
Phone
MBS NO DROUGHT@GMAIL.COM
Email

I am the building owner or NC state licensed contractor, which legally entitles me to perform such work on the above structure. I attest that all work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations. **By signing this application, I affirm that I have obtained permission from the above listed license holder to purchase permits on their behalf.** If doing the work as owner, I understand that I cannot rent, lease, or sell the listed property for 12 months after completion of the listed work.

[Signature]
Signature of Owner/Contractor

5-14-25
Date