



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: 277 Sneed Lane PIN: _____

LANDOWNER: Olesea + Jon Puscasu Mailing Address: same

City: Farmington State: NC Zip: 27524 Phone: 725-266-2133 Email: puscasu.olesea@gmail.com

JOB COST (required): \$ 9000

DESCRIPTION OF WORK: Install water softener + reverse osmosis

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 Water softener

CONTRACTOR INFORMATION

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

Matthew's plumbing solutions
Contractor's Company Name
515 S. New Hope Rd #106 Raleigh NC
Address
33606
License #

919-977-1896
Phone
info@matthewsplumbingsolutions.com
Email
PLEASE USE THIS EMAIL
ekraske@orcabluewater.com

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

Contractor's Company Name

Address

License #

Phone

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

06/16/2025
Date