



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

INDIVIDUAL TRADE APPLICATION

CONSTRUCTION TYPE: Residential ☒ Non-Residential ☐

SITE ADDRESS: 282 RAFFER LANE, SANFORD 27332 PIN: 9670-50-2430.000

LANDOWNER: MICHAEL + ANGIE LICATA Mailing Address: SAME

City: _____ State: _____ Zip: _____ Phone: _____ Email: _____

JOB COST (required): 6000.00

DESCRIPTION OF WORK: INSTALL WATER LINE + TEMPORARY SPIGOT

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.

PARADISE HOMES - SHAWN COX
Contractor's Company Name
8007 NC HWY 222 W, KENLY
Address
30991
License #

SHAW-919-842-0746 PARADISE
Phone 919-284-5206x200
NVRWRN678@NCTZERO.COM
Email

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.

Shawn Cox
Signature of Owner/Contractor

7-21-25
Date