



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: 354 Chesley Lane Lillington PIN: _____

LANDOWNER: David Gardner Mailing Address: 354 Chesley Lane

City: Lillington State: N.C. Zip: 27546 Phone: (919) 810-6536 Email: judygardner55@gmail.com

JOB COST (required): \$7,090

DESCRIPTION OF WORK: replace shower and valve assembly

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 1 Other _____

CONTRACTOR INFORMATION

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

McLeod Home Services
Contractor's Company Name
20 Mary Gray Ct Fugary Varina 27526
Address
101475
License #

(919) 464-9137
Phone
gene@mcleodhomeservices.com
Email

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

Certified Plumbing
Contractor's Company Name
4212 Hicks Rd Garner 27529
Address
36693
License #

(919) 880-4072
Phone
certifiedplumbing2300@yahoo.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

10/1/2025
Date