

Application # _____

Harnett County Central Permitting

PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.harnett.org/permits
Certification of Work Performed By Owner/Contractor
(Individual Trade Application)

Owner (s) of Structure: GARY & KELLIE MORRISON Phone: 910-891-8923

Owner (s) Mailing Address: 174 BAYLES RD LILLINGTON NC 27546

Land Owner Name (s): GARY & KELLIE MORRISON Phone: 910-891-8923

Construction or Site Address: 174 BAYLES RD LILLINGTON NC 27546

PIN # _____ Parcel # _____

Job Cost: 1644.21 Description of Work to be done RUN APPROX 100' OF LP LINE FROM TANK TO STUB OUT FOR WATER HEATER, LOGS AND GRILL

Mechanical: New Unit With Ductwork ___ New Unit Without Ductwork ___ Gas Piping Other ___

Electrical*: 200 Amp ___ <200 Amp ___ Service Change ___ Service Reconnect ___ Other ___
* For Progress Energy customers we need the premise number

Plumbing: Water/Sewer Tap ___ Number of Baths ___ Water Heater ___

Specific Directions to Job from Lillington:

Subdivision: _____ Lot #: _____

I MICHAEL E DENNING will provide the GAS PIPING labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 21095, which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations.

DIXIE DENNING SUPPLY CO
Contractor's Company Name
705 S WALL STREET BENSON NC 27504
Address
21095
License # _____

919-894-3824
Telephone
maria.dixiedenning@gmail.com
Email Address

Structure Owner / Contractor Signature:  Date: 4/4/23

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**