

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

| OITE ADDDEOG | | | | DIN | |
|---|--|---|-----------------------------------|--|--|
| SITE ADDRESS: | | | PIN: | | |
| ANDOWNER: | | Mailing Add | ess: | | |
| City: State: | Zip: Pł | none: | Em | ail: | |
| IOB COST (required): | | | | | |
| DESCRIPTION OF WORK: _ | | | | | |
| Mechanical: New Unit With I | Ductwork □ New | Unit Without Ductv | ork 🗆 | Gas Piping □ Other | |
| Electrical: 200 Amp □ | Greater than 200 Am | o □ Service Cha | inge □ | Service Reconnect Other | |
| Plumbing: Water Tap/Sew | ver Connection □ | Water Heater □ | Numb | er of Fixtures Other | |
| | <u>cc</u> | NTRACTOR INFO | RMATIO | <u> </u> | |
| * Must be o | owner or licensed contracto | <mark>r. Address, company na</mark> | me & phon | e must match information on license. | |
| Contractor's Company Name | | | Phone |) | |
| Address | | | Email | | |
| icense # | | | | | |
| Mechanical change outs & | generator applicatio | ns require both el | ectrical d | & mechanical information. If applicable: | |
| Contractor's Company Name | | | Phone | | |
| Address | | | Email | | |
| icense # | | | | | |
| attest that all work shall co egulations. <mark>By signing this</mark> | omply with the State I application, I affirm behalf. | Building Code and that I have obtair | all other <mark>ed perm</mark> | ne to perform such work on the above structure applicable State and local laws, ordinances and sission from the above listed license holder that I cannot rent, lease, or sell the listed proper | |
| | | | | | |