## Revision - Received - 12/19/18

Application # <u>BRES1810-00</u>03

.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: KOMONA MCKOY Phone: 910-658-6555
Owner (s) Mailing Address: 3878 NC 27W
LILLINGTON, NCZ7546
Land Owner Name (s):Phone:
Construction or Site Address:
PIN # Parcel #
Job Cost:Description of Work to be done NSTALL 3.5TON 14SEELAC
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 #:
1
I am the building owner or my NC state license number is $\frac{O(e)}{O(e)}$ , 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.
ACNON Contractor's Company Name  FOLD PATESTINE RD LINDEN NC  Address  1910-822-4294  Telephone  ACNOW 16 @GWAL.COM  Email Address  Email Address
Structure Owner / Contractor Signature: Jamie Provide Date: 12-18-18  Pur gigning this application you offirm that you have abtained permission from the above listed license helder to
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

\*Company name, address, & phone must match information on license

the listed property for 12 months after completion of the listed work.