| Application # | |
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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: Crystal Johnson Phone: 910-890-6127 |
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| Owner (s) Mailing Address: 72 Medical Center Rd. |
| Ullington NC 27546 |
| Land Owner Name (s):Phone: |
| Construction or Site Address: |
| PIN # Parcel # |
| Job Cost: 5,440.00 Description of Work to be done DUCT System Replacement |
| 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: |
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| |
| Subdivision:Lot #: |
| (Contractors Name) will provide the labor on this structure. |
| I am the building owner or my NC state license number is 315912, 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. |
| Custom 72 Degrees Inc. Contractor's Company Name 919-777-9717 Telephone |
| 34169 Apex Peakway Apex NC Address Email Address |
| 3 59 License # |
| Structure Owner / Contractor Signature: Milling May Date: 12 13 18 |

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