

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: Jeffery obannan Phone: (919) 602-9206

Owner (s) Mailing Address: 1190 Lafayette Rd
Fuquay Varina NC 27526

Land Owner Name (s): Jeffery obannan Phone: (919) 602-9206

Construction or Site Address: 1190 Lafayette Rd Fu NC 27526

PIN # _____ Parcel # _____

Job Cost: \$500⁰⁰ Description of Work to be done disconnect/reconnect
HVAC system for unit replacement (1st floor)

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:
401 N toward Lafayette school
R on Lafayette Rd.
1190 is on the right

Subdivision: _____ Lot #: _____

I Robbie church will provide the electrical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 21305-L, 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.

Church's Electric Co, Inc.
Contractor's Company Name

(919) 868-9352
Telephone

5592 Christian Light Rd
Address

barnold@barco-mechanical.com
Email Address

21305-L
License #

Fuquay Varina
27526

Structure Owner / Contractor Signature: Barkley Stea Arnold 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**

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Certification of Work Performed By Owner/Contractor
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Owner (s) Mailing Address: 1190 Lafayette Rd
Fuquay Varina NC 27526

Land Owner Name (s): Jeffery Obannon Phone: (919) 602-9206

Construction or Site Address: 1190 Lafayette Rd Fuquay Varina NC 27526

PIN # _____ Parcel # _____

Job Cost: \$5,500⁰⁰ Description of Work to be done Replace existing unit with like but newer unit (1st floor)

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:

401 N toward Lafayette school -
R on Lafayette Rd - 1190 Lafayette is on the right -

Subdivision: _____ Lot #: _____

I Barkley Arnold will provide the HVAC labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 18460, 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.

Barco Mechanical, Inc.
Contractor's Company Name

(919) 868-3354
Telephone

122 Philemon Drive Fuquay Varina
Address NC 27526

Barnold@barcomechanical.com
Email Address

18460
License #

Structure Owner / Contractor Signature: Barkley Shea Arnold Date: 12/13/18

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Fuquay Varina NC 27526
 Land Owner Name (s): Jeffery obannon Phone: (919) 602-9206
 Construction or Site Address: 1190 Lafayette F-VNC 27526
 PIN # _____ Parcel # _____

Job Cost: \$5,500⁰⁰ Description of Work to be done Replaced existing unit with like but newer unit (2nd floor)

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 ___

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Subdivision: _____ Lot #: _____

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 Contractor's Company Name Telephone
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 Address 27526 Email Address
18460
 License #

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Construction or Site Address: 1190 Lafayette Rd

PIN # _____ Parcel # _____

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HVAC system for unit replacement (2nd floor)

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Electrical*: 200 Amp <200 Amp Service Change Service Reconnect Other
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