

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: Jeff & Sue Davis Phone: 910-230-9045

Owner (s) Mailing Address: 200 Marion Drive Erwin, NC 28339

Land Owner Name (s): Jeff & Sue Davis Phone: 910-230-9045

Construction or Site Address: 200 Marion Drive Erwin, NC 28339

PIN # _____ Parcel # _____

Job Cost: \$ 14,000 Description of Work to be done: HVAC change out. Remove & replace existing system. 2 ton HP split, ductwork approx 1080 sqft. change breaker size, service downstairs, reconnect mechanical.

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 #: _____

Carolina Comfort Air, Inc will provide the MECH/ELEC labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 20515/30332-1, 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.

Carolina Comfort Air, Inc
Contractor's Company Name
5212 US Hwy 70 Bus W Clayton, NC
Address
20515/30332-1
License #

919-550-7711 ext. 126
Telephone
Volanda@carolinacomfortair.com
Email Address

Structure Owner / Contractor Signature: [Signature] Date: 4-3-19

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



Town of Erwin
Zoning Application & Permit
 Planning & Inspections Department

Permit #

Rev Jan 2013

Each application should be submitted with an attached plot/site plan with the proposed use/structure showing lot shape, existing and proposed buildings, parking and loading areas, access drives and front, rear, and side yard dimensions.

Name of Applicant	Carolina Control Air, Inc	Property Owner	JEFF & SUE DAVIS
Home Address	5212 US Hwy 70 BUS W	Home Address	200 Marion Drive
City, State, Zip	Claudio, NC 27520	City, State, Zip	Erwin, NC 28339
Telephone	919-550-7711	Telephone	910-230-9045
Email	Yolanda@carolinacontrol.com	Email	_____

Address of Proposed Property	200 Marion Drive Erwin, NC 28339		
Parcel Identification Number(s) (PIN)	0597-82-371.00	Estimated Project Cost	14,500
What is the applicant requesting to build / what is the proposed use of the subject property? Be specific.	HVAC change out, remove & replace existing system. 2 ton HP split, approx 1080, change breaker size. serves the downstairs of home & reconnect electrical.		
Description of any proposed improvements to the building or property	_____		
What was the Previous Use of the subject property?	residential		
Does the Property Access DOT road?	NO		
Number of dwelling / structures on the property already	3		
Property / Parcel Size	.62		
MUST circle one that applies to property	Existing/Proposed Septic System	Or	Existing/Proposed County/City Sewer

Owner/Applicant Must Read and Sign

The undersigned property owner, or duly authorized agent/representative thereof certifies that this application and the forgoing answers, statements, and other information herewith submitted are in all respects true and correct to the best of their knowledge and belief. The undersigning party understands that any incorrect information submitted may result in the revocation of this application. Upon issuance of this permit, the undersigning party agrees to conform to all applicable town ordinances, zoning regulations, and the laws of the State of North Carolina regulating such work and to the specifications of plans herein submitted. The undersigning party authorizes the Town of Erwin to review this request and conduct a site inspection to ensure compliance to this application as approved.

Print Name	Yolanda Owens	Signature of Owner or Representative	[Signature]	Date	4-3-19
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For Office Use

Zoning District	R-10	Existing Nonconforming Uses or Features	_____
Front Yard Setback	25'	Other Permits Required	Conditional Use ___ Building ___ Fire Marshal ___ Other ___
Side Yard Setback	10'	Zoning Permit Status	<input checked="" type="checkbox"/> Approved ___ Denied
Rear Yard Setback	35'	Fee Paid:	_____
Comments		Date Paid:	_____
Need permit to change out HVAC		Staff Initials:	_____

Signature of Town Representative:	[Signature]	Date Approved/Denied:	4/1/19
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NOT in FEMA Flood zone, wetlands or watershed