

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: Tiffany Brock Phone: 910-813-7533

Owner (s) Mailing Address: 219 Regimental Dr.
Cameron, N.C. 28326

Land Owner Name (s): Tiffany Brock Phone: _____

Construction or Site Address: 219 Regimental Drive

PIN # _____ Parcel # _____

Job Cost: 5,000 Description of Work to be done Hvac unit change out

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:

North on 24, Right on Sawyer Rd., Right on
Marquis Dr., Left on Regimental

Subdivision: Lexington Plantation Lot #: _____

I Honest Air will provide the Hvac labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 34140, 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.

Honest Air L.L.C.
Contractor's Company Name

910-849-8818
Telephone

2026 Hope Mills Rd. Fayetteville
Address

Honestairfayetteville
Email Address @gmail

34140
License #

Structure Owner / Contractor Signature: Sabrina [Signature] Date: 4-30-19

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**

Application # _____

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Cameron NC 28326

Land Owner Name (s): Tiffany Brock Phone: _____

Construction or Site Address: 219 Regimental Dr

PIN # _____ Parcel # _____

Job Cost: _____ Description of Work to be done: HVAC unit change out

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* For Progress Energy customers we need the premise number

Plumbing: Water/Sewer Tap ___ Number of Baths ___ Water Heater ___

Specific Directions to Job from Lillington:

North on 29, Right on Sawyer Rd Right on
Marquis Dr left on Regimental

Subdivision: Lexington Plantation Lot #: _____

I Wo's Electric will provide the electrical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 196280, 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.

Wo's Electric
Contractor's Company Name

910.850.5495
Telephone

575 Cope Rd Red Springs NC 28377
Address

Email Address

196280
License #

Structure Owner / Contractor Signature: Sarahtha Hugguboth Date: 4.30.19

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