

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: Cindy Guy Phone: 910-890-1624

Owner (s) Mailing Address: 1550 US 421 North
Lillington, NC 27546

Land Owner Name (s): Cindy Guy Phone: 910-890-1624

Construction or Site Address: 1550 US 421 North Lillington, NC 27546

PIN # _____ Parcel # _____

Job Cost: \$9580 Description of Work to be done: HVAC change out, remove +
replace existing system. 2 1/2 ton HP pack, reconnect
electrical

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-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.

Carolina Comfort Air, Inc
Contractor's Company Name

5212 US Hwy 70 Bus W
Address

20515/30332-L
License #

919-530-7711 ext. 126
Telephone

Volanda@carolinacomfortair.com
Email Address

Structure Owner / Contractor Signature: Volanda Dene Date: 8/19/19

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