

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: _____ Phone: _____

Owner (s) Mailing Address: _____

Land Owner Name (s): Robert Marion Phone: 425-499-8194

Construction or Site Address: 129 Box Terrace Cameron, NC 28326

PIN # _____ Parcel # _____

Job Cost: 4200 Description of Work to be done 3 Ton HP Condenser and matching mobile home Coil

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 #: _____

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 19628U, 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	910.850.5495
Contractor's Company Name	Telephone
575 Cope RD Red Springs, NC 28377	
Address	Email Address
19628U	
License #	

Structure Owner / Contractor Signature:  Date: 4/9/2020

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
(Individual Trade Application)

Owner (s) of Structure: _____ Phone: _____

Owner (s) Mailing Address: _____

Land Owner Name (s): Robert Marion Phone: 425-499-8194

Construction or Site Address: 129 Box Terrace Cameron, NC 28326

PIN # _____ Parcel # _____

Job Cost: 5,000.00 Description of Work to be done 3 Ton HP Condenser and matching mobile home coil

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 #: _____

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
Contractor's Company Name
2026 Hope Mill RD
Address
34140
License #

910-849-8818
Telephone
Honestairdispatch@gmail.com
Email Address

Structure Owner / Contractor Signature: [Signature] Date: 4/9/2020

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*Company name, address, & phone must match information on license