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: Plant Star Prop. Phone: 910 033 1300 Owner (s) Mailing Address: 408 NC 24 -81
Land Owner Name (s): Fight Star Prop Laurence Phone: 910 (038 1300) Construction or Site Address:
PIN # Parcel #
Job Cost: 10737 Description of Work to be done C/O HVAC
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 #:
All Seasons ACH gwill provide the HVAC Electrical abor on this structure. (Contractors Name) (Trade)
I am the building owner or my NC state license number is 24 (19), 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.
Contractor's Company Name 910 808 02000 Telephone
3981 Cumberland Rd Comforteal Seasons acarding Address
24109
License #
Structure Owner / Contractor Signature: Date: 10 7 20
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

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

the listed property for 12 months after completion of the listed work.