

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: Sarah & Phillip Jenkins Phone: 919-475-7416

Owner (s) Mailing Address: 29 Willow Run
Sanford, NC 27332

Land Owner Name (s): same Phone: _____

Construction or Site Address: _____

PIN # _____ Parcel # _____

Job Cost: 6000 Description of Work to be done remove & replace 3 ton split heat pump with same

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: Carolina Lakes Lot #: _____

I Service Edge will provide the HVAC & Electrical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 34460, SPPH33565, 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.

Service Edge LLC

910-984-1095

Contractor's Company Name

Telephone

135 Our Way, Linden, NC 28356

robert@serviceedgeair.com

Address

Email Address

34460, SPPH33565

License #

Structure Owner / Contractor Signature:  Date: 11-19-2020

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**