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)	No.
Owner (s) of Structure: 1004 Haire Phone: 919.235.8451	
Owner (s) Mailing Address: 2868 Fair Ovound Road	
Coats, NC 27521	
Land Owner Name (s): Tony Haire Phone: 919. 235. 8451	
PIN#	
Job Cost: 11,000 Description of Work to be done TCO CC CKUSDNO SUSTEM.	
elegnical elegnical breaker size, Reconnect	
Mechanical: New Unit With Ductwork New Unit Without Ductwork X Gas Piping Other	
Electrical*: 200 Amp <200 Amp \(\sum \) Service Change \(\sum \) Service Reconnect \(\sum \) Other	
Plumbing: Water/Sewer Tap Number of Baths Water Heater	
Specific Directions to Job from Lillington:	
Subdivision:Lot #:	

Application #

labor on this structure.

Owhich entitles me to

Contractor's Company Name **Email Address**

(Trade)

Structure Owner / Contractor Signature:

Comfort Adar provide the MECH EVEC

I am the building owner or my NC state license number is 3580

other applicable State and local laws, ordinances and regulations.

(Contractors Name)

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.

perform such work on the above structure legally. All work shall comply with the State Building Code and all

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