

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: EMILY KNIGHT Phone: 913-961-1818

Owner (s) Mailing Address: 20 GRAYSON PLACE
SANFORD NC 27332

Land Owner Name (s): EMILY KNIGHT Phone: 913-961-1818

Construction or Site Address: 20 GRAYSON PLACE SANFORD NC 27332

PIN # _____ Parcel # 1

Job Cost: \$13,755 Description of Work to be done 3.5 TON HEAT PUMP
& AIR HANDLER

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 Comfort First Heating & Coolin will provide the MECHANICAL / ELECTRICAL labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 18855/ 21474, 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.

Comfort First Heating & Cooling
Contractor's Company Name
7001 Lark Lane, Sanford NC 27332
Address
18855 / 21474
License # _____

919-569-5161
Telephone
installadmin@yourcomfortfirst.com
Email Address



Structure Owner / Contractor Signature: _____ Date: 10-4-2021

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**