

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: Eric Avery	Phone: 8049293901
Owner (s) Mailing Address: 39 Bladen St Spring Lake N	C 28390
Land Owner Name (s): Eric Avery	Phone: 8049293901
Construction or Site Address: 39 Bladen St Spring Lake	NC 28390
PIN#Parc	el#
Job Cost: \$5,076.00 Description of Work to be don connecting to existing duct system	
Mechanical: New Unit With Ductwork New Unit Electrical*: 200 Amp	
* For Progress Energy customers we ne	hange Service Reconnect ✓ Other eed the premise number
Plumbing: Water/Sewer Tap Number of	
Specific Directions to Job from Lillington:	
Subdivision:	Lot #:
I Foost Heating and Air will provide the McCoor (Contractors Name) I am the building owner or my NC state license number perform such work on the above structure legally. All w	nical & Electrical labor on this structure. (Trade) r is 11439 HJ H3 21, which entitles me to
other applicable State and local laws, ordinances and r	regulations
	ogalations.
Foust Heating and Air Conditioning Inc Contractor's Company Name	9103230587
2976 Dunn Rd Eastover NC 28312	Telephone
Address	kim@foustair.com
7439 H2 H3 27413-SP-PH icense #	Email Address
Structure Owner / Contractor Signature: Michael C	Found Date: 09-07-21
By signing this application you affirm that you have obta	ained permission from the above lists this

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

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