

Application # _____

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fax 910-893-2793 - www.harnett.org/permits
Certification of Work Performed By Owner/Contractor
(Individual Trade Application)

Owner (s) of Structure: Craig Orchard Phone: 706-294-3333

Owner (s) Mailing Address: 191 TYLERSTONE DRIVE
FUQUAY-VARINA NC 27526

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: _____

PIN # _____ Parcel # _____

Job Cost: 10,000 Description of Work to be done 2.5 ton split HP, panel box
outside, no ladder needed, no breaker change

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 #: _____

Carolina Comfort tr will provide the Mech/Electrical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 23988-L/31589 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.

Carolina Comfort tr
Contractor's Company Name
5212 US HWY 70 BUS W. CLAYTON NC 27520
Address
23988-L/31589
License #

919-550-7711
Telephone

Email Address

Structure Owner / Contractor Signature: [Signature] Date: 9/23/2021

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