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:	elicia Miller	Phone: 919 922	2928
Owner (s) Mailing Address	: 300 willowcroft c	Phone: 919922 VT DWN	
		04:10	*
Land Owner Name (s):	SAME	Phone: SAME	
Construction or Site Address	ss:_SAME		
PIN #	Parcel #		
Job Cost: 9428 00 De Pack & recorm	scription of Work to be done <u>Cl</u>	range out 4 ton o	yas
Mechanical: New Unit Wit	h Ductwork New Unit Withou	ut Ductwork Gas Piping O	ther
	<200 Amp Service Change service Change is Energy customers we need the	Service Reconnect Other premise number	
Plumbing: Water/Sew	er Tap Number of Baths	Water Heater	
Specific Directions to Job fro	om Lillington:		
	, .		
Subdivision:		Lot #:	
I Jaksun & SWS (Contractors Name) I am the building owner or m	will provide the MECh E	Alct labor on this struct (Trade) 557 28554, which entitles m	ure. e to
		all comply with the State Building C	
other applicable State and Id	ocal laws, ordinances and regulati	ons.	
Contractor's Company Name 2300 Indian Spr Address		Telephone Telephone Telephone Telephone Telephone Telephone	<u>sunun</u> dsons.com
License # Structure Owner / Contractor	-	Date: 11/17	2)
By signing this application yo	ou affirm that you have obtained p	ermission from the above listed lice	ilise libidel 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