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:	COLBY CAMERON	Phone: ⁶⁰³⁻⁵⁵⁶⁻¹⁴⁸⁴
Owner (s) Mailing Addr	ess: 112 SAW GRASS COUR	Т
() 3	BUNNLEVEL, NC 28323	
Land Owner Name (s):	COLBY CAMERON	Phone: 603-556-1484
Construction or Site Ad	dress: 112 SAW GRASS COL	JRT
		arcel#
		done HVAC CO REMOVE AND REPLACE EXSTING SYSTMELECTRCL. EQP LCTD CWRLSPC/OTSD
Mechanical: New Uni	t With Ductwork New I	Jnit Without Ductwork 🖊 Gas Piping Other
		e Change Service Reconnect 🛩 Other e need the premise number
Plumbing: Water/s	Sewer Tap Numbe	r of Baths Water Heater
Specific Directions to Jo	ob from Lillington:	
Subdivision:		Lot #:
CAROLINA COMFORT (Contractors N	AIR INC will provide the ME ame)	CH/ ELEC labor on this structure. (Trade)
I am the building owner	or my NC state license nui	mber is 29077/23988-L, which entitles me to
perform such work on the	ne above structure legally.	All work shall comply with the State Building Code and all
other applicable State a	and local laws, ordinances a	and regulations.
CAROLINA COMFORT A	IR INC	919-550-7711
Contractor's Company Name		Telephone
5212 US HWY 70 BUS W	CLAYTON, NC 27520	yolanda@carolinacomfortair.com
Address 29077/23988-L		Email Address
License #	_	
Structure Owner / Cont	ractor Signature:	planda Owens 11/18/2021

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.