

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: Nicole Swain Phone: 254-415-2750

Owner (s) Mailing Address: 164 Valley Stream Rd. Spring Lake NC 28390

Land Owner Name (s): Nicole Swain Phone: 254-415-2750

Construction or Site Address: 164 Valley Stream Rd. Spring Lake NC 28390

PIN # _____ Parcel # _____

Job Cost: 16086 Description of Work to be done c/o & r/c 3.5 HP & AH 10KW - Attic/Whole Zoned Like for Like

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 & Cooling will provide the Mechanical/Electrical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is M-18855 E -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, LLC
Contractor's Company Name
7001 Lark Lane Sanford NC 27332
Address
m-18855 e-21474
License # _____

9195695161
Telephone
installadmin@yourcomfortfirst.com
Email Address

Structure Owner / Contractor Signature: *Jimmy Pierce Joel Worsham* Date: 7/28/2022

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**