

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: Rosemary Martinez Phone: 210-771-8199

Owner (s) Mailing Address: 1629 Micahs N Way, Spring Lake NC 28390

Land Owner Name (s): Rosemary Martinez Phone: 210-771-8199

Construction or Site Address: 1629 Micahs N Way, Spring Lake NC 28390

PIN # _____ Parcel # _____

Job Cost: \$14,117 Description of Work to be done C/O & R/C 3.5 Ton HP & AH, 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: Anderson Crk Club Lot #: 778

I Jimmy Pierce/Joel Worsham will provide the Mech/Electrical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 18855/21474, 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 and Cooling
Contractor's Company Name

919-569-5161
Telephone

7001 Lark Lane, Sanford NC 27322
Address

installadmin@yourcomfortfirst.com
Email Address

18855/21474
License #

Structure Owner / Contractor Signature: Jimmy Pierce Joel Worsham Date: 8/3/22

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