Application a	1

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:	Brookside Hills LTD		Phone: 910-436-1983	
Owner (s) Mailing Addres	ss: 56 Sweet Lane			
owner (e) maining ricere	Spring Lake, NC 2	8390		
_and Owner Name (s): _	3		Phone:	
Construction or Site Add	ress: 35-A Honey Dr,	Spring Lake, NC 28390		
PIN # 0504-96-1591.000	C33	Parcel # 0105250043		
FIIN #		raicei#		
Job Cost: 5,346.99	Description of Work	to be done Change Out - Go	oodman 2 Ton SHP w/ 10KW	
	8 0)			
Mechanical: New Unit	With Ductwork	New Unit Without Ductwor	k 🗸 Gas Piping Other	
		Service Change Serviners we need the premise r	ce Reconnect Other	
Plumbing: Water/S	ewer Tap	Number of Baths V	Vater Heater	
Specific Directions to Jol	o from Lillington:			
a Brookside H	ills Anartment	Lot #:	35-A Honey	
Subdivision: Brookside H	illo Apartificiti	Lot #.		
Total Systems HTG & CL	.G will provide	he HVAC	labor on this structure.	
(Contractors Na	ame)	(Trac	de)	
I am the building owner or my NC state license number is 28846				
			y with the State Building Code and all	
other applicable State as			,	
other applicable otate at	ia local laws, orani	ances and regulations.		
Total Systems Heating and Cooling, Inc			910-436-3450	
Contractor's Company Name			Telephone	
133341 NC HWY 210 S, Spring Lake NC 28390			service@totalsystemsnc.com	
Address			Email Address	
28846				
License #				
		Jempfall	Date April 11 2	
Structure Owner / Contr		////		
By signing this application	on you affirm that yo	u have obtained permissio	on from the above listed license holder to	
purchase permits on the	ir behalf. If doing th	e work as owner you under	rstand that you cannot rent, lease or sel	

the listed property for 12 months after completion of the listed work.