

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: Donald Cahill Phone: 910-624-2389

Owner (s) Mailing Address: 53 Pine Hill Ct Spring Lake NC 28390

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: _____

PIN # _____ Parcel # _____

Job Cost: 12176 Description of Work to be done C/O & R/C 3.0 ton Heat pump & air handler-
Attic/upstairs-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 and 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 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

9195695161

Contractor's Company Name

Telephone

7001 Lark Lane Sanford NC 27332

installadmin@yourcomfortfirst.com

Address

Email Address

18855/21474

License #

Structure Owner / Contractor Signature: Comfort First Heating and Cooling Date: _____

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**