Application	TT .	
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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: SARAH RODE	Phone: 207-290-7117
Owner (s) Mailing Address: 19 ATKINS VILLAGE COU	RT FUQUAY VARINA NC 27526
	* *
Land Owner Name (s): SARAH RODE	Phone: 207-290-7117
Construction or Site Address: 19 ATKINS VILLAGE COL	
PIN # Parcel #	
Job Cost: 11500 Description of Work to be done hvac change out,remove and replace existing system. 4 unit services 1st floor & 2nd floor Zoned, duct mods- in: damper, reconnect electrical Mechanical: New Unit With Ductwork New Unit Without MODIFICATIONS ONLY	stall new supply plenumns, install new 14" bypa
MODIFICATIONS ONLY	Buothork Guot iping Guioi
Electrical*: 200 Amp <200 Amp X_ Service Change _ * For Progress Energy customers we need the p	Service Reconnect X Other premise number
Plumbing: Water/Sewer Tap Number of Baths _	Water Heater
Specific Directions to Job from Lillington:	
openic birectors to sob from Ellington.	
	·
Subdivision:	Lot #:
(Contractors Name) CAROLINA COMFORT AIR INC. MECH/ELEC	(Trade)
I am the building owner or my NC state license number is 3158	
perform such work on the above structure legally. All work sha	
other applicable State and local laws, ordinances and regulation	
ono, apphoazio otato ana total lanti, otaliano,	
CAROLINA COMFORT AIR INC	919-550-7711
Contractor's Company Name	Telephone
5212 US HWY 70 BUS W CLAYTON,NC 27520	yolanda@carolinacomfortair.com
Address	Email Address
31589/23988-L	
License #	00/04/2022
Structure Owner / Contractor Signature: Golanda Ow	09/21/2023 ensDate:
By signing this application you affirm that you have obtained per purchase permits on their behalf. If doing the work as owner yo	ermission from the above listed license holder to

*Company name, address, & phone must match information on license

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