

Application # _____

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: ELLEN & BRIAN BUSH Phone: 910 944 1086

Owner (s) Mailing Address: 347 STONEY CREEK DRIVE, SANFORD, NC 27332

Land Owner Name (s): ELLEN & BRIAN BUSH Phone: 910 944 1086

Construction or Site Address: _____

PIN # _____ Parcel # 030507 0183 14

Job Cost: 31,629 Description of Work to be done MECHANICAL CHANGE OUT/INSTALLATION XV20 H.O.T TRANE SPLIT H/P

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 BRAD HAINLEY will provide the HVAC labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 30377, 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.

SANDHILLS HEATING, REFRIGERATION,
Contractor's Company Name ELECTRICAL
PO BOX 1341 SOUTHERN PINES, NC
Address 28388
30377
License #

910 944 1086
Telephone
keeley@sandhillsheating.com
Email Address
Keeley

Structure Owner / Contractor Signature: [Signature] Date: 05/14

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