

Ph.: 910-893-7525 - Fax: 910-893-2793 / www.harnett.org/permits
Certification of Work Performed By Owner/Contractor
(Individual Trade Application)

Owner (s) of Structure: Jessica Wolf Wright Phone: 919.639.3475
Owner (s) Mailing Address: 275 Scotts Creek Run
Angier, NC 27501
Land Owner Name (s): same as above Phone: _____
Construction or Site Address: _____
PIN # _____ Parcel # _____

Job Cost (Required): 8,000.00 Description of Work to be done Equipment change out

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 Triangle Heating & Air, Inc. will provide the Mechanical - Electrical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 25537 / 29812-L, 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.

triangle Heating and Air, Inc.
Contractor's Company Name
PO Box 1833 Angier, NC 27501
Address

919-669-1264
Telephone
trianglefa1@gmail.com
Email Address

25537 / 29812-L
License #

Structure Owner / Contractor Signature: [Signature] Date: 05/10/2024

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**
Faxed or Mailed application could have an approximately 1-5 day process time