

Application # _____

Harnett County Central Permitting

420 McKinney Pkwy / PO Box 65 Lillington, NC 27546 – centralpermitting@harnett.org
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: Sara Ducharme Phone: (603) 283-8015

Owner (s) Mailing Address: 159 Kentucky Derby Lane
Lillington, NC 27546

Land Owner Name (s): Sara Ducharme Phone: (603) 283-8015

Construction or Site Address: 159 Kentucky Derby Lane, Lillington NC 27546

PIN # _____ Parcel # _____

Job Cost (Required): 3000.00 Description of Work to be done HVAC changeout of 2nd fl system, like for like with 2.5-ton split heat pump system located in attic

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 Derek Lynn will provide the mechanical labor on this structure.
(Contractor's Name) (Trade)

I am the building owner or my NC state license number is 23462, 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.

Thermo Direct

Contractor's Company Name
4901 Trademark Drive, Raleigh NC 27610

Address
23462 H-3
License #

(919) 771-2665
Telephone
homeprojects@thermodirectinc.com
Email Address

Structure Owner / Contractor Signature: Derek Lynn Date: 6/18/2024

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

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Lillington, NC 27546

Land Owner Name (s): Sara Ducharme Phone: (603) 283-8015

Construction or Site Address: 159 Kentucky Derby Lane, Lillington NC 27546

PIN # _____ Parcel # _____

Job Cost (Required): 200.00 Description of Work to be done Disconnect existing system and connect the replacement HVAC equipment to existing electrical connections

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 Marc Kelly will provide the Electrical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 29609, 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.

Thermo Direct

Contractor's Company Name

4901 Trademark Drive, Raleigh NC 27610

Address

29609-4

License #

(919) 771-2665

Telephone

homeprojects@thermodirectinc.com

Email Address

Structure Owner / Contractor Signature: Marc Kelly Date: 6/18/2024

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

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