

### 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: Matthew Karas Phone: 919 616 1727

Owner (s) Mailing Address: 1415 Atkins Road  
Fuquay Varma, NC 27526

Land Owner Name (s): Matthew Karas Phone: 919 616 1727

Construction or Site Address: \_\_\_\_\_

PIN # \_\_\_\_\_ Parcel # \_\_\_\_\_

Job Cost: \$4424.06 Description of Work to be done: Whole Home Reduct

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 Michael and Son will provide the Mechanical labor on this structure.  
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 33791/36174, 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.

Michael and Son  
Contractor's Company Name  
4001 Atlantic Ave Raleigh 27604  
Address  
36174/33791  
License #

919 267 1463  
Telephone  
permitsnc@michaelandson.com  
Email Address

Structure Owner / Contractor Signature: [Signature] Date: 7/29/20

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

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PIP

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