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: Adrian Mitchell	Phone: <u>/5/-608-1218</u>
Owner (s) Mailing Address: 115 Scotland Dr. Spring Lake	e, NC 28390
Land Owner Name (s): Adrian Mitchell	Phone: 757-608-1218
Construction or Site Address: 115 Scotland Dr. Spring La	ake, NC 28390
PIN # Parcel # _	
00.077	
Job Cost: \$8,977 Description of Work to be done Cha	
Air Handler located in the attic unit service for upstairs - Like	e for Like.
Mechanical: New Unit With Ductwork New Unit With	out Ductwork/_ Gas Piping Other
Electrical*: 200 Amp <200 Amp Service Change   * For Progress Energy customers we need the	
Plumbing: Water/Sewer Tap Number of Bath	s Water Heater
Specific Directions to Job from Lillington:	
Subdivision:	Lot #:
I Jimmy Pierce/Joel Worsham (Contractors Name) will provide the mechanical	ul/electrical labor on this structure.
I am the building owner or my NC state license number is _	18855/21474 , 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 regul	ations.
Comfort First Heating and Cooling	919-569-5161
Contractor's Company Name	Telephone
7001 Lark Lane, Sanford NC 27332	installadmin@yourcomfortfirst.com
Address	Email Address
18855/21474 License #	
LICEUSE #	
Structure Owner / Contractor Signature: Qimmy Pierce	Gosl Worsham Date: 10/2/2024
By signing this application you affirm that you have obtained purchase permits on their behalf. If doing the work as owner	d permission 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.