			Applica	tion #	
Mailing Address - PO B	Ph.: 910-893-7525 - Certification of V	Vork Performed By	Permitting ess – 420 McKir www.harnett.org	ney PKWY Lillington permits ractor	
		ividual Trade Applic	cation)	Tenant occ	upied
wner (s) of Structure:	James G	reason	Phone:_	Temant occ	0-988
wner (s) Mailing Address	s: 326 (	201010185700	e Dr.	28390	
and Owner Name (s): _			Phone:		
onstruction or Site Addre	ess:				
IN #		Parcel #			
ob Cost (Required):	Description Split Head	of Work to be done_	Replace	e HVA	2,
lechanical: New Unit V		New Unit Without Du	ictwork 1/2	as Piping Othe	r
lectrical*: 200 Amp _	<200 Amp {	Service Change ners we need the prer	Service Reco	_ /	
그렇게 되었다. 이 이 이 아니는 아니는 아니는 아니는 것이 없는데 하는데 없다.	**************************************	lumber of Baths	_ Water He	ater	
Specific Directions to Job					
Subdivision:			Lot #:		
Jonathan Soci (Contractors Nam	will provide theme)	ne HV	AC la (Trade)	bor on this structure	e.
am the building owner o	r my NC state licen	se number is 3	436	, which entitles me	to
erform such work on the	above structure le	gally. All work shall o			
ther applicable State and					
Scott Sevy Contractor's Company Na	ice Compa	mu_		)-309-2	270
1621 MCArth	ame aur Rolo Fo	metteville, s	VC Sc	none OHYService	(000)
31436		282	Email		tmail. 0
icense #					
Structure Owner / Contra	ctor Signature:	Gnathen K Seo	Н	Date: 111	2/2025
by signing this application, you sehalf. If doing the work as own sted work.	affirm that you have obtainer you understand that y	ained permission from the you cannot rent, lease or s	above listed licer sell the listed prop	so holder to number	
*Com	pany name, addi	ress, & phone mus	st match inf	ormation on line	neo
		on could have an			
			approximate	ay 1-3 day proce	ss time

Turner Electric of Hope Mills

Bernice Turner # 5362 I

910-624-3379