

INDIVIDUAL TRADE APPLICATION

CentralPermitting@Harnett.org (910) 893-7525 ext:1 420 McKinney Pkwy (physical) PO Box 65 (mailing) Lillington, NC 27546

CONSTRUCTION TYPE: Residential Non-Residential
SITE ADDRESS: 2710 Sky croft Dr Sanford NC 27332 PIN:
LANDOWNER: Mariah Johnson Mailing Address: 276 Skycroft Dr
City: Sanford State: NC Zip: 27332 Phone: 573-337-3117 Email:
417 770 10
JOB COST (required): \$\frac{\pi}{2} \sqrt{770.00}
DESCRIPTION OF WORK: HVAC Change out / HP Split /5 ton / Attic Access
Mechanical: New Unit With Ductwork □ New Unit Without Ductwork ☐ Gas Piping □ Other
Electrical: 200 Amp □ Greater than 200 Amp □ Service Change □ Service Reconnect □ Other
Plumbing: Water Tap/Sewer Connection Water Heater Number of Fixtures Other Other
CONTRACTOR INFORMATION
* Must be owner or licensed contractor. Address, company name & phone must match information on license.
Contractor's Company Name 919 - 895 - 3600 Phone
232 Wilson Rd Sanford NC 27332 Kinghtuzir 1895 Camail.com
Address Email) Email)
License #
Mechanical change outs & generator applications require both electrical & mechanical information. If applicable:
King Heating and Air Contractor's Company Name 919 - 895 - 3600 Phone
King Heating and Air Contractor's Company Name 232 Witson Rd Sanford NC 27332 Address Address 919 - 875 - 3600 Phone Kinghtgair 1895 Cymail.com Email
Address Email) Email)
License #
Lam the building owner or NC state licensed contractor which Is allowed the second contractor which Is allowed to the second c
I am the building owner or NC state licensed contractor, which legally entitles me to perform such work on the above structure. I attest that all work shall comply with the State Building Code and all other applicable State and local laws, ordinances and
regulations. By signing this application, I affirm that I have obtained permission from the above listed license holder to purchase permits on their behalf. If doing the work as owner, I understand that I cannot rent, lease, or sell the listed property
for 12 months after completion of the listed work.
1/1/
Signature of Owner/Contractor Date

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