



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

INDIVIDUAL TRADE APPLICATION

CONSTRUCTION TYPE: Residential ☒ Non-Residential ☐

SITE ADDRESS: 19 Rockingham St, Spring Lake, NC 28390 PIN: 0514-44-8280.000

LANDOWNER: Edward Wilson Mailing Address: 19 Rockingham St

City: Spring Lake State: NC Zip: 28390 Phone: 315-751-9910 Email: emailforewilson@cs.com

JOB COST (required): 10,000.00

DESCRIPTION OF WORK: Replace 2 Ton SHP

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 _____

CONTRACTOR INFORMATION

* Must be owner or licensed contractor. Address, company name & phone must match information on license.

Total Systems Heating & Cooling, Inc

Contractor's Company Name

13341 NC Hwy 210 S, Spring Lake, NC 28390

Address

36823

License #

910-436-3450

Phone

service@totalsystemsnc.com

Email

Mechanical change outs & generator applications require both electrical & mechanical information. If applicable:

D2 Electric

Contractor's Company Name

100 Hidden Creek Lane, Lillington, NC 27546

Address

24311-L

License #

910-723-3242

Phone

d2electric1@gmail.com

Email

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.


Signature of Owner/Contractor

8/27/25
Date