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: Anthony Cerniglia	Phone: (910) 922-7693
Owner (s) Mailing Address: 491 Robeson St. Spring Lake,	NC 28390
Land Owner Name (s): Anthony Cerniglia	Phone: (910) 922-7693
Construction or Site Address: 491 Robeson St. Spring Lak	e, NC 28390
PIN # Parcel #	
000 440	
Job Cost: \$23,143 Description of Work to be done Change	
Air Handler located in the attic unit service whole house - Like	for Like.
Mechanical: New Unit With Ductwork New Unit Without	Ductwork Gas Piping Other
Electrical*: 200 Amp <200 Amp Service Change _ * For Progress Energy customers we need the p	
Plumbing: Water/Sewer Tap Number of Baths _	Water Heater
Specific Directions to Job from Lillington:	
Subdivision:	Lot #:
I _Jimmy Pierce/Joel Worsham will provide the mechanica (Contractors Name)	ul/electrical labor on this structure. (Trade)
I am the building owner or my NC state license number is $\underline{}$	855/21474 , which entitles me to
perform such work on the above structure legally. All work sha	all comply with the State Building Code and all
other applicable State and local laws, ordinances and regulation	ons.
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 #	
License #	
Structure Owner / Contractor Signature:	Ool Worsham Date: 10/9/2025
By signing this application you affirm that you have obtained purchase permits on their behalf. If doing the work as owner you	ermission from the above listed license holder to

the listed property for 12 months after completion of the listed work.