

CONSTRUCTION TYPE (circle one):

INDIVIDUAL TRADE APPLICATION

Non-Residential

Residential)

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

SITE ADDRESS: 121 Wessex Cr	PIN: 9564-68-6/62
LANDOWNER: James + THERESA LEE Mailing Add	
City: CAMERON State: NC Zip: 28326 Phone: 919-888-26	663 Email:
JOB COST (required): 4 8393	
DESCRIPTION OF WORK: CO LIKE FOR LIKE & TON HP	RECONNECT - CRAWL
Mechanical: New Unit With Ductwork □ New Unit Without Ductw	vork ☑ Gas Piping □ Other
Electrical: 200 Amp ☐ Greater than 200 Amp ☐ Service Cha	ange ☐ Service Reconnect ☐ Other RECONNECT
Plumbing: Water Tap/Sewer Connection ☐ Water Heater ☐	
CONTRACTOR INFO	RMATION
* Must be owner or licensed contractor. Address, company na	me & phone must match information on license.
CAROLINA AXR HEATING & COOLING	910 947 7707
Contractor's Company Name	Phone
3700 HWY 15-501 CARTHAGE NC 28327	
Address	KELLY @ CAROLINAMIR. COM Email
34838	
License #	
Mechanical change outs & generator applications require both el	ectrical & mechanical information. If applicable:
CAROLEWA POWER S GENERATORS	910 947 7707
Contractor's Company Name	Phone
3700 Hwy 15-501 CARTHAGE NC 28327	
Address	KELLY @ CAROLIN44IR. COM Email
32340	Na. (1 10.1)
License#	
I am the building owner or NC state licensed contractor, which legally	entitles me to perform such work on the above structure.
l attest that all work shall comply with the State Building Code and	
regulations. By signing this application, I affirm that I have obtain purchase permits on their behalf, If doing the work as owner, I und	led permission from the above listed license holder to
for 12 months after completion of the listed work.	lerstand that i cannot rent, lease, or sell the listed property
5 + (/ _	10/12/2
Signature of Owner/Contractor	10/13/25 Date
O'SHOULD OF OHING OPHICADIO	Pato :