

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

INDIVIDUAL TRADE APPLICATION

| CONSTRUCTION TYPE (circle one): Residential Non-Re | sidential |
|--|--|
| SITE ADDRESS: 141 BROOKGREEN LN | PIN: 9553-44-4125. 000 |
| LANDOWNER: DAN MCPHERSON Mailing Add | dress: 141 BREOKGREEN LN |
| City: Camerau State: NC Zip: 28326 Phone: 910 690 15 | <u>43</u> Email: |
| JOB COST (required): \$95\3 | |
| DESCRIPTION OF WORK: CO LIKE FOR LIKE 3.5 TO | N CAS PACK + RECONNECT |
| Mechanical: New Unit With Ductwork ☐ New Unit Without Duct | work 🖔 Gas Piping 🗆 Other |
| Electrical: 200 Amp ☐ Greater than 200 Amp ☐ Service Ch | nange Service Reconnect Other RECONNECT |
| Plumbing: Water Tap/Sewer Connection ☐ Water Heater ☐ | Number of Fixtures Other |
| CONTRACTOR INF | <u>ORMATION</u> |
| * Must be owner or licensed contractor. Address, company of | ame & phone must match information on license. |
| CAROLZNA AIR HEATING & COOLENG | 910 947 7707 |
| Contractor's Company Name 99 NELSON CT CLAYTON NC 27520 | Phone VELLY @CARALTANATA ATA |
| Address | KELLY @CAROLINGAIR.COM- |
| 34838 | |
| License # | |
| Mechanical change outs & generator applications require both e | electrical & mechanical information. If applicable: |
| CAROLINA POWER ! GENERATORS | |
| Contractor's Company Name | SAME Phone |
| 3700 Huy 15-501 CARTHAGE NC 28327 | SAME |
| Address | Email |
| 32340 | |
| License# | |
| I am the building owner or NC state licensed contractor, which legally 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 unfor 12 months after completion of the listed work. | d all other applicable State and local laws, ordinances and ined permission from the above listed license holder to |
| 5 at Car | 1126/25 |
| Signature of OwnerContractor | 11/26/25 Date/ |
| 44 | • |