

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: Mount Pisan FWBC Phone: 910-893-8974 514

Owner (s) Mailing Address: 145 Prospect Church Erwin

Land Owner Name (s): \_\_\_\_\_ Phone: \_\_\_\_\_

Construction or Site Address: \_\_\_\_\_

PIN# \_\_\_\_\_ Parcel # \_\_\_\_\_

Job Cost: \$11,000 Description of Work to be done Change out Gas pack

Mechanical: New Unit With Ductwork  New Unit Without Ductwork  Gas Piping  Other

Electrical: 200 Amp  <200 Amp  Service Change  Service Reconnect  Other   
\* For Progress Energy customers we need the premise number

Plumbing: Water/Sewer Tap  Number of Baths  Water Heater

Specific Directions to Job from Lillington: \_\_\_\_\_

Subdivision: \_\_\_\_\_ Lot #: \_\_\_\_\_

I Kent Johnson will provide the MECH labor on this structure.  
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 17164, which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations.

J & M HUNT  
Contractor's Company Name

9108975501  
Telephone

724 TURLINGTON RD  
Address

\_\_\_\_\_  
Email Address

17164  
License #

Structure Owner / Contractor Signature: [Signature] x Jasmine Hunt Date: 11/04/19

By signing this application you affirm that you have obtained permission from the above listed license holder to purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or sell the listed property for 12 months after completion of the listed work.

\*Company name, address, & phone must match information on license

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Owner (s) of Structure: Mount Pisan FWBC Phone: 910 ~~410~~ 897 4 514

Owner (s) Mailing Address: 145 prospect church Erwin

Land Owner Name (s): \_\_\_\_\_ Phone: \_\_\_\_\_

Construction or Site Address: \_\_\_\_\_

PIN# \_\_\_\_\_ Parcel # \_\_\_\_\_

Job Cost: \$11,000 Description of Work to be done change out GAS pack

Mechanical: New Unit With Ductwork \_\_\_\_\_ New Unit Without Ductwork \_\_\_\_\_ Gas Piping \_\_\_\_\_ Other \_\_\_\_\_

Electrical: 200 Amp \_\_\_\_\_ <200 Amp \_\_\_\_\_ Service Change \_\_\_\_\_ ~~Service Reconnect~~ \_\_\_\_\_ Other \_\_\_\_\_  
\* For Progress Energy customers we need the premise number

Plumbing: Water/Sewer Tap \_\_\_\_\_ Number of Baths \_\_\_\_\_ Water Heater \_\_\_\_\_

Specific Directions to Job from Lillington: \_\_\_\_\_

Subdivision: \_\_\_\_\_ Lot #: \_\_\_\_\_

I Tommy Parnell will provide the elec. labor on this structure.  
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 049104, which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations.

Parnell LLC  
Contractor's Company Name  
13001 N. Main St Lillington  
Address

(910) 237-1594  
Telephone

049104  
License #

\_\_\_\_\_  
Email Address

Structure Owner / Contractor Signature: Tommy Parnell XJL Date: 11/04

By signing this application you affirm that you have obtained permission from the above listed license holder to purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or sell the listed property for 12 months after completion of the listed work.

\*Company name, address, & phone must match information on license