	Application #
Harnett County Central Po PO Box 65 Lillington, NC 27546 - Ph; 910-893-7525 - Fx; 91 Certification of Work Performed By C (Individual Trade Applica	0-893-2793 - www.hamett.org/permits Dwner/Contractor ation)
Owner (s) of Structure: Jing Mester	Phone: 014-1033-13010
Owner (s) Malling Address: 416 NC 24 HWY	87
Cameon NC 383	326
Land Owner Name (s):	Phone:
Construction or Site Address:	
PIN # Parcel #	
Job Cost: 7400 Description of Work to be done Change	neat pump
Mechanical: New Unit With Ductwork New Unit Without Duct	work Gas Piping Other
Electrical*: 200 Amp <200 Amp Service Change Service Chang	ervice Reconnect X Other _ Farmers
Plumbing: Water/Sewer Tap Number of Baths	Water Heater
Specific Directions to Job from Lillington:	
Subdivision:Lo	t #:
Larry Parker will provide the Mechanical (Tontractors Name)	labor on this structure.
(Contractors Name) (T	rade)
I am the bullding owner or my NC state license number is 200	1.2, which entitles me to
perform such work on the above structure legally. All work shall con	nply with the State Building Code and all
other applicable State and local laws, ordinances and regulations.	
Certified Heating & Air, Inc	910-858-0000
Contractor's Company Name	Telephone
PO Box 1071 Hope Mills, NC 28348	ehrin,certified@gmall.com
Address 20012	Email Address
License #	
Structure Owner / Contractor Signature:	Date: 11-(2-21
By signing this application you affirm that you have obtained permiss purchase permits on their behalf. If doing the work as owner you und the listed work. The listed property for 12 months after completion of the listed work.	sion from the above listed license holder to derstand that you cannot rent, lease or sell

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