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: <u>ODFS Bapfist Church</u> Phone: 910-897-5173
Owner (s) Mailing Address:
Land Owner Name (s):Phone:,
Construction or Site Address: 554 N. McKinley St. Conk NV 27521
PIN# 0090-76-8405.000 Parcel# 07069015010014 01
Job Cost: \$ 8000.00 Description of Work to be done Change out split Achil & Coat
Mechanical: New Unit With Ductwork New Unit Without Ductwork V 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#:
Subdivision:Lot #:
1 Kent Johnson will provide the Mechanical labor on this structure.
(Contractors Name) will provide the Mchanical labor on this structure.
I will provide the Manifal   labor on this structure. (Contractors Name) (Trade)   I am the building owner or my NC state license number is / 7/64 , which entitles me to
I am the building owner or my NC state license number is
Icht Johnson   will provide the   McMarital   labor on this structure. (Contractors Name)   (Trade)     I am the building owner or my NC state license number is   ///o4   , 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.    January   J

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

Application #

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Certification of Work Performed By Owner 19
Certification of Work Performed By Owner/Contractor (Individual Trade Application)
Owner (s) of Structure: Last Baptist Church Phone: 910-897-5173
Owner (s) or structure;
Owner (s) Mailing Address:
Land Owner Name (s):Phone:
Construction or Site Address: 554 N. McKinley St. Coak NV. 27521
Land Owner Name (s):Phone:  Construction or Site Address: 554 N. McKinley St., Coats NL. 27521  PIN #Parcel #
× 200.00
Job Cost: Description of Work to be done Change out split Accord
Condensor, Reconnect power.
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 #;
(Contractors Name) will provide the <u>Electrical</u> labor on this structure.
(Contractors Name) will provide the <u>Electrical</u> labor on this structure.
Mill Will provide the Electrical   labor on this structure. (Contractors Name) (Trade)   labor on this structure.   labor on th
Mill Will provide the Electrical labor on this structure. (Contractors Name)   (Trade)     I am the building owner or my NC state license number is 28392   which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all
Contractors Name   Will provide the   Electrical   Labor on this structure. (Trade)   Lam the building owner or my NC state license number is   28492   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.
I am the building owner or my NC state license number is 283492, 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.  On Time Electric Contractor's Company Name  Telephone  Telephone
I will will provide the Electrical   labor on this structure. (Contractors Name)   (Trade)     I am the building owner or my NC state license number is   283492   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.    On Time Electric   99 69 7209     Contractor's Company Name   Coats MC 38334
Mill Will   will provide the
I Milliam Will provide the Electrical labor on this structure.  (Contractors Name)  I am the building owner or my NC state license number is 2849L, 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.  On Time Electric  Contractor's Company Name  252 Fark Came, Cause MC 28334  Address  Email Address  Email Address
Mill Will   will provide the
I Milliam Will provide the Electrical labor on this structure.  (Contractors Name)  I am the building owner or my NC state license number is 2849L, 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.  On Time Electric  Contractor's Company Name  252 Fark Came, Cause MC 28334  Address  Email Address  Email Address

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



## MECHANICAL RESIDENTIAL 910-893-7525

PERMIT NUMBER MRES1807-0040

www.harnett.org

JOB ADDRESS: 554 N MCKINLEY ST	PERMIT SUBTYPE: UP TO 2 UNIT RE INCLUDES ELECTRICAL	T SUBTYPE: UP TO 2 UNIT REPLACEMENT DES ELECTRICAL	
DESCRIPTION: Chg Out Split AC Coil & Condenser	DATE ISSUED:	DATE E	XPIRED:
PLAN NAME:	ZONING DISTRICT: Residential Agriculture - 11.24 acres (100.0%)		
APPLICANT: J & M HEATING AND A/C CO INC.		PHONE:	(910)897-5501
724 TUDUNCTON DD. DUNN NG 20224			h

554 N MCKINLEY ST COATS, NC 27521 COATS, NC 27521-0000	EMAIL:
OWNER: COATS MISSIONARY BAPTIST	PHONE:
724 TURLINGTON RD DUNN, NC 28334	EMAIL: busterstone@centurylink.net
CONTRACTOR: J & M HEATING AND A/C CO INC.	PHONE: (910)897-5501
724 TURLINGTON RD DUNN, NC 28334	EMAIL: busterstone@centurylink.net
APPLICANT: J & M HEATING AND A/C CO INC.	PHONE: (910)897-5501

REQUIRED INSPECTIONS					
INSPECTION TYPE	APPROVAL	DATE	COMMENTS		
FINAL**					



## Cash Register Receipt Harnett County

## Receipt Number R336

DESCRIPTION		QTY	PAID
PermitTRAK			\$90.00
MRES1807-0040	Address: 554 N MCKINLEY ST	APN: 0690-76-8405.000	\$90.00
RESIDENTIAL M	ECHANICAL FEES		\$90.00
UP TO 2	UNIT REPLACEMENT	0	\$90.00
TOTAL FEES PAID BY	RECEIPT: R336	(1) (1) (1) (1) (1) (1)	\$90.00

Date Paid: Wednesday, August 01, 2018 Paid By: J & M HEATING AND A/C CO INC.

Cashier: LL

Pay Method: CREDIT CARD 34116

