

Application # MRES1810-0050

**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: Herbert Williams Phone: 910 658 7684

Owner (s) Mailing Address: \_\_\_\_\_

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

Construction or Site Address: 514 Terrigan Road Lane, Dunn NC 28334

PIN # 1509-17-4521 000 Parcel # 0715090055 02 / Coats

Job Cost: 4500.00 Description of Work to be done Remove & replace condenser and "A" coil. 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 #: \_\_\_\_\_

I Kent Johnson will provide the Mechanical 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 Heating and Air  
Contractor's Company Name

910 897 5501  
Telephone

724 Truckstop Road, Dunn NC 28334  
Address

bustersdane@centurylink.net  
Email Address

17164  
License #

Structure Owner / Contractor Signature: Kent Johnson JAS Date: 10/29/18

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

*Received  
10/30/18 CR*

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

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

Job Cost: 4500.00 Description of Work to be done: Remove & replace condenser and "A" coil. 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 #: \_\_\_\_\_

I Michael Collier will provide the Electrical labor on this structure.  
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 28249-L, 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

919 669 7209  
Telephone

352 Park Lane, Coats NC 27521  
Address

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

28249-L  
License #

Structure Owner / Contractor Signature: Michael Collier / O.S. Date: 10/29/18

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