

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: Samuel B Blanchard Phone: 910 890 3148

Owner (s) Mailing Address: 149 Burkot Rd
Lillington, NC 27546

Land Owner Name (s): same Phone: same

Construction or Site Address: _____

PIN # 0670-42-4357-000 Parcel # 110670 0283

Job Cost: 2800 Description of Work to be done _____

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 ___

RA-40

Specific Directions to Job from Lillington:

Subdivision: _____ Lot #: _____

I Andy Watkins will provide the Mechanical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 17615, 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.

Indoor Comfort Systems LLC
Contractor's Company Name
PO Box 1714 Dunn, NC 28335
Address

910 897 1853
910 891 8472
Telephone

17615
License #

Email Address

Structure Owner / Contractor Signature: Samuel B Blanchard Date: 11-27-18

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**

11/11/11

2011-11-11

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