

Application # MRES1901-0029

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: Deborah Blackman Phone: _____

Owner (s) Mailing Address: 1575 Mclean Chapel Church Rd
Bunn level NC 28123

Land Owner Name (s): Deborah Blackman Phone: 910 985 3025

Construction or Site Address: _____

PIN # _____ Parcel # _____

Job Cost: 5000⁰⁰ Description of Work to be done: Install 2 ton split heat pump / with new ducts

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 Lonnie Mattheu will provide the HVAC & etc. labor on this structure.
(Contractors Name)

I am the building owner or my NC state license number is 15487 etc 13756 HVAC 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.

Lonnie Matthews
Contractor's Company Name

910 818 6533
Telephone

6 Wildwood Lake Foxfire, NC 27281
Address

lmatthews17@gmail.com
Email Address

13756-H-3 15487 etc
License #

Structure Owner / Contractor Signature: L Mattheu Date: 1-22-19

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