

Harnett County Central Permitting

PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.hamett.org/permits

Certification of Work Performed By Owner/Contractor

(gis) Jackson / Jerry / Kim (Individual Trade Application)

Owner (s) of Structure: Hilda L. Parker Phone: 910-891-9129

Owner (s) Mailing Address: 38 TANNING Ridge Dr.
Dunn, NC

Land Owner Name (s): Same Phone: _____

Construction or Site Address: Same

PIN # _____ Parcel # _____

Job Cost: \$500.00 Description of Work to be done Set LP Gas tank - Install lines to a future generator - Install lines to log existing stub out - Pressure test system

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:

421 to Dunn - Rt on 301 - Rt on Jonesboro - Lft on Lane (before truck stop) - Lft into Tanning Ridge Sub - 1st house on Rt.

Subdivision: TANNING Ridge Lot #: _____

I, Mclamb's LP Gas will provide the gas piping labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 17517, 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.

Mclamb's LP Gas & Supply
Contractor's Company Name

919-894-3842
Telephone

3469 NC 242-S Benson, N.C.
Address

info@mclambslpgas.com
Email Address

17517
License #

Structure Owner / Contractor Signature: David W. Mclamb by Date: 1/29/19

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

Please call for credit card payment.

PROPANE SAFETY SHEET

Service Date 1/29/19
 Account Number _____
 Name Hilda Parker
 Address 38 Taming Ridge Dr
Dunn, N.C.
 Telephone: (Home) _____
 (Office) _____ (Cell) 910-891-9129

County Harett
 Directions Turn left on Dunn - Rt
on Loop Rd - Lt on Taming
Ridge Rd - 1st house on Rt
 Closest Customer _____

APPLIANCE TYPE	MANUFACTURER	MODEL NUMBER	SERIAL NUMBER	LOCATION	BTU	AGE	MANUAL SHUTOFF	VENTING	SEDIMENT TRAP	RECALL VALUE	RED TAG (Remove from Service)	WORK DESCRIPTION
Generator	Generigas	E20N6HC	A054x497	Dunn	309,000	30,000	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			Set LP tank - Install lines to generator - Install lines to existing shut out - Pressure test system
											info@mclambslpgas.com Benson's LP Gas & Supply 3469 NC 242 South Benson, NC 27504 (919) 894-3842	

TANK OWNED BY (Check One): Company Customer

The customer acknowledges that he/she 1) knows how to turn off gas in emergencies, 2) has smelled and can detect propane odor, 3) has received other safety instructions, 4) understands any gas problems and corrections, and 5) is satisfied with the work performed and 6) that the customer acknowledges tank ownership as indicated above. The serviceman acknowledges that he/she 1) performed odor test, 2) performed leak test and pressure test, and 3) has given the customer safety instructions.

Customer Signature [Signature] Serviceman Signature [Signature]

TANK SPECIFICS/CONDITION:

SIZE	SERIAL #	MFG.	MFG. DATE	LEGAL LOCATION	TANK CONDITION	RELIEF VALVE COND.	FITTINGS LEAK TEST
250	E2K500A	Trinity	'18	<input checked="" type="checkbox"/>	Good	Good	ok

PIPING/REGULATOR OPERATION/CONDITION:

REGULATOR TYPE	PIPING MATERIAL	PIPING SIZE	REGULATOR DATE CODE	MFG./MODEL	REGULATOR VENT PROTECT.
Int. Two-Stage					
1st Stage	Cu	1/2	'18	Fisher	Done
2nd Stage	BS	3/4	'18	Fisher	Done

SYSTEM LEAK TEST (Lock up pressure):

REGULATOR TYPE	MEASURED START PRESSURE (w.c.)	MEASURED END PRESSURE (w.c.)	TIME HELD IN MINUTES	SYSTEM CHECK (OK)	REMARKS
Int. Two-Stage					
1st Stage	9.25	9.25	10	ok	
2nd Stage					
2nd Stage regulator pressure with all appliances running: _____ inches w.c.					

Piping Test for New Construction: 1st Stage 50 psig; 2nd Stage and Integral Two-Stage 10 psig. 10-minute minimum
 Lock up pressure should not exceed 14 inches w.c.
Working Pressure Requirement: Working pressure should not fall below 10 inches w.c. or manufacturers recommendations