

Harnett County Central Permitting
Lillington, NC 27548 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.harnett.org/permits
Certification of Work Performed By Owner/Contractor
(Individual Trade Application)

Structure: Craig Matthew Realty Phone: 9108978009 4228
Mailing Address: PO BOX 309 COATS NC

Land Owner Name (s): _____ Phone: _____
Construction or Site Address: 23 H SOUTH TURNER CIRCLE COATS NC
PIN # _____ Parcel # _____

Job Cost: \$6000 Description of Work to be done CHANGE OUT SSHP

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 Mech labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 17104, 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 3 M HVAC
Contractor's Company Name
224 Tunington Rd Dunn
Address
17104
License #

9108975501
Telephone
Busterstone@centurylink
Email Address

Structure Owner / Contractor Signature: _____ Date: _____

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

emailing signed applications

Application # MRES1902-0020

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: Craig Sease Matthew Realty Phone: 9108978099 4228

Owner (s) Mailing Address: PO BOX 399 COATS NC

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: 23 H SOUTH TURNER CIRCLE COATS NC

PIN # _____ Parcel # _____

Job Cost: \$6000 Description of Work to be done CHANGE OUT SSHP

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 TOMMY PATRICK will provide the elec labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 49104, 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.

PATRICK elec
Contractor's Company Name

Telephone

1309 N. MAIN ST LILLINGTON
Address

Email Address

49104
License #

Structure Owner / Contractor Signature: _____ Date: _____

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**