## Application # MRE 51903- C

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.hametcorg/permits Certification of Work Performed By Owner/Contractor (Individual Trade Application)

Owner (s) of Structure: Doe Hines Phone: 9/03037505
Owner (s) Mailing Address:
Land Owner Name (s): Phone:
Construction or Site Address: 1835 W. Blackman Rd., Dunn NC 28334
PIN# Parcel #
Job Cost: # Ago Description of Work to be done Change out equipment only and reconnect power.
act realities found
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#:
(Contractors Name) will provide the Methanical labor on this structure.  (Trade)  I am the building owner or my NC state license number is 11/64, 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.
JYM Hearmand Air 910 897 5501
Contractor's Company Name  724 Turking row Road, Dunn N.C., 2834  Address Address Road, Dunn N.C., 2834  Email Address
17/64 License #
Structure Owner / Contractor Signature: 18nt Johnson 185- Date: 3/18/19
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

\*Company name, address, & phone must match information on ficense

## Application# mizES1903-0033

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Owner (s) Mailing Address:	
Land Owner Name (s):	Phone:
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Electrical*: 200 Amp <200 Amp Service Change Service Tropress Energy customers we need the premise no	
Plumbing: Water/Sewer Tap Number of Baths W	ater Heater
Specific Directions to Job from Lillington:	4
Subdivision:Lot#	
Michael Jollier will provide the Electrical (Contractors Name)	7.
I am the building owner or my NC state license number is _26249-	, 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	919669 7209
252 fact lane, Coats MC 27521	Telephone
Address	Email Address
d8244-L	
License #	lac plates
Structure Owner / Contractor Signature: //////	5.3. Date: 5/18/19
By signing this application you affirm that you have obtained permission	C

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the listed property for 12 months after completion of the listed work.