

Application # _____

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: Turlington Real Estate Phone: 919 669 8729
Owner (s) Mailing Address: _____

Land Owner Name (s): _____ Phone: _____
Construction or Site Address: 603 N. Main Street, Apt. 21, Lillington NC 27546
PIN# _____ Parcel # _____

Job Cost: \$4200.00 Description of Work to be done Change out equipment, 2 ton split heat pumps.

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

I am the building owner or my NC state license number is 17164, 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.

Jim Heat and Air Contractor's Company Name Telephone 910 847 9501
724 Turlington Road, Dunn NC 28534 Address Email Address bostonstone@centurylink.net
17164 License #

Structure Owner / Contractor Signature: Kent Johnson / B.S. Date: 4/29/19

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

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Plumbing: Water/Sewer Tap _____ Number of Baths _____ Water Heater _____

Specific Directions to Job from Lillington: _____

Subdivision: _____ Lot #: _____

I Tommy Patrick will provide the Electrical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 4910U, 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 Electrical Contractors
Contractor's Company Name
1309 N. Main Street, Lillington NC 27546
Address
4910U
License #

910 893 5774
Telephone

Email Address

Structure Owner / Contractor Signature: Tommy Patrick / BS Date: 4/29/19

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***Company name, address, & phone must match information on license**