

Application # MRES1905-0026

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: Alicia Hartsfield Phone: 919-274-1919

Owner (s) Mailing Address: 590 Old Stage Rd
Peats NC 27521

Land Owner Name (s): Alicia Hartsfield Phone: 919 274-1919

Construction or Site Address: 590 Old Stage Rd

PIN # _____ Parcel # _____

Job Cost: 5850 Description of Work to be done Change out heat pump

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: Rt 421 S, Lft Leslie Campbell
Lft Old Stage

Subdivision: _____ Lot #: _____

Robert Marshall will provide the Electrical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 33265, 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.

Bowman Mechanical RDL, LLC
Contractor's Company Name
145 Technical Ct Garner NC 27529
Address
33265
License #

919 772 2759
Telephone
deana@bowmanmechanical
Email Address services.com

Structure Owner / Contractor Signature: Robert Marshall Date: 5/10/19

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: Rt 4215 left Leslie Campbell
left old stage

Subdivision: _____ Lot #: _____

I Nathan Bartlett will provide the Mechanical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 12302, 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.

Bowman Mechanical RDU, LLC
Contractor's Company Name
145 Technical Ct Garner NC 27529
Address
12302
License #

919 772-2759
Telephone
deana@bowmanmechanicalservice.com
Email Address

Structure Owner / Contractor Signature: [Signature] Date: 5/10/19

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