Application #MRES 1900-0004

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:	WILLIAM CONNELLY	Phone: 910 436-5468
Owner (s) Mailing Addr		
	CAMERON 28326	
Land Owner Name (s):	WILLIAM CONNELLY	Phone: 910 436-5468
Construction or Site Ad	dress: 235 LEGGETT DR. CAMER	ON 28326
		I #
Job Cost:	_Description of Work to be done	CHANGE OUT SPLIT HEAT PUMP. NO DUCT WORK
Mechanical: New Uni	t With Ductwork New Unit	Mithout Ductwork ✓ Gas Plping Other
	o<200 Amp Service Ch ogress Energy customers we ne	ange Service Reconnect <u>✓</u> Other ed the premise number
Plumbing: Water/	Sewer Tap Number of	Baths Water Heater
Specific Directions to J	ob from Lillington:	
opposite to o	TOTAL CAME IN COLUMN STATE OF THE STATE OF T	,
MINISTER CONTROL A.		
Subdivision:		Lot #:
	*	
MARK-AIR/ALLMAN EL	EC. will provide the MECHA	NICAL/ELECTRICAL labor on this structure.
(Contractors N	ame)	(Trade)
I am the building owner or my NC state license number is 15874/6136U, which entitles me to		
perform such work on t	he above structure legally. All v	ork shall comply with the State Building Code and all
other applicable State	and local laws, ordinances and r	egulations.
MARK-AIR INC./ALLMAN	LECTRIC	910 484-6565
Contractor's Company	Name	Telephone
PO BOX 41104 FAYETT	EVILLE 28309	MARKAIRINC@NC.RR.COM
Address		Email Address
15874/6136U	_ //	
License #	///	
Structure Owner / Conf	ractor Signature:	Date: 05/30/2019
By signing this applicat	ion you affirm that you have obt	ained permission from the above listed license holder

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