Application # <u>MIRES 1906</u> 0033

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

Owner (s) of Structure: Walter HintonPhone: 919 868 -296
Owner (s) Mailing Address: 2430 Baileys cross Road rd Cocts
Land Owner Name (s):Phone:
Construction or Site Address:
PIN#
Job Cost: But Description of Work to be done change out Maule
name coil and condenser
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 CTrade labor on this structure.
I am the building owner or my NC state license number is 29240L, 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.
an time
Contractor's Company Name
252 paine land coars
Address Email Address
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 se

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

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

Application # MRESICIOU-0032

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: Walter Hinton Phone: 919 868 - 2967
Owner (s) Mailing Address: 2430 Baileys cross Road rd Cocits
Land Owner Name (s):Phone:
Construction or Site Address:
PIN # Parcel #
71000
Job Cost: 8 4000 Description of Work to be done Change Out Moule
name coil and condenser
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#:
Labor on this structure.
(Contractors Name) Men Iabor on this structure.
Kent June Will provide the Mich labor on this structure. (Contractors Name) (Trade) lam the building owner or my NC state license number is 1144, which entitles me to
(Contractors Name) Men Iabor on this structure.
Left June Labor on this structure. Labor o
Went June Will provide the labor on this structure. (Contractors Name) (Trade) am the building owner or my NC state license number is, 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. [Thu] [And June 1] [Trade] [And June 2] [And June 2] [And June 3] [And June
Kent June Gwill provide the

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