

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: Milton Homes Phone: 910 890 0555

Owner (s) Mailing Address: _____

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: 21 H Collins Drive, Buries Creek NC

PIN # _____ Parcel # _____

Job Cost: 4500⁰⁰ Description of Work to be done: Replace HVAC equipment
only & reconnect power. 2 1/2 Ton split 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: _____

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.

J&M Heating & Air
Contractor's Company Name
724 Turlington Road, NC 28334
Address
17164
License #

910 897 5501
Telephone
busterstone@centurylink.net
Email Address

Structure Owner / Contractor Signature: Kent Johnson Date: 6/27/19

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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only & reconnect power, 2 1/2 Ton split heat pump

Mechanical: New Unit With Ductwork New Unit Without Ductwork Gas Piping Other

Electrical*: 200 Amp <200 Amp Service Change Service Reconnect Other
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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 Telephone 910 893 5774
Contractor's Company Name

1309 W. Main Street, Lillington NC 27546 Email Address _____
Address

4910U
License #

Structure Owner / Contractor Signature: Tommy Patrick / S.S. Date: 6/27/19

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