Application # MRES1907

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: Robert Rain Bower	Phone: 276-696-7614
Owner (s) Mailing Address: 22% Williams Road	
Crats NC 27521	
Land Owner Name (s): Same as above	Phone:
Construction or Site Address:	
PIN # Parcel #	
Job Cost: 5000. " Description of Work to be done Equipment Change Out	
Mechanical: New Unit With Ductwork / New Unit Withou	
Electrical*: 200 Amp <200 Amp Service Change * For Progress Energy customers we need the	Service Reconnect Other premise number
Plumbing: Water/Sewer Tap Number of Baths	Water Heater
Specific Directions to Job from Lillington:	
Subdivision:	Lot #:
Triangle Heating 4 Air will provide the mechanical (Contractors Name)	(Trade) labor on this structure.
I am the building owner or my NC state license number is	5531 29812-L. which entitles me to
perform such work on the above structure legally. All work s	hall comply with the State Building Code and all
other applicable State and local laws, ordinances and regula	119.64.1264. Cell
Triangle Heating + Air, In. Contractor's Company Name	919.439.2328-0+Are Telephone
PO BOX 1833 Angier NC 27501 Address	Triangle for a symbol. com Email Address
25531 26812 - L License #	
Structure Owner / Contractor Signature:	Date: <u>UT-03-2619</u>
By signing this application you affirm that you have obtained purchase permits on their behalf. If doing the work as owner the listed property for 12 months after completion of the liste	you understand that you cannot rent, lease or sell

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