

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: Willy West Phone: 9108972754
Owner (s) Mailing Address: 791 Tris Bryant Erwin Nc 28:339
Land Owner Name (s):Phone:
Construction or Site Address:
PIN # Parcel #
Job Cost: 1000 Description of Work to be done Change Out package Unit Recentling 2.5 Tay
Mechanical: New Unit With Ductwork New Unit Without Ductwork 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#:
WINTTOWNS Will provide the WICO labor on this structure.
Will provide the WICO labor on this structure. (Contractors Name) (Trade) am the building owner or my NC state license number is 11(1), which entitles me to
WINTTOWNS Will provide the WICO labor on this structure.
Will provide the WICO labor on this structure. (Contractors Name) (Trade) am the building owner or my NC state license number is 11(1), which entitles me to
I labor on this structure. (Contractors Name) (Trade) I 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
I am the building owner or my NC state license number is
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*Company name, address, & phone must match information on license

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Owner (s) of Structure:	UN WEST	Phone: 9100912730
Owner (s) Mailing Address:	all the Bajart	Faul NC 28139
Land Owner Name (s):		Phone:
Construction or Site Address:		
PIN#	Parcel #	
Job Cost: 1000 Descrip	tion of Work to be done Char	the out package
Mechanical: New Unit With Du	ctwork New Unit Without Ductw	ork _ Gas Piping _ Other _
Electrical*: 200 Amp <20 * For Progress Er	00 Amp Service Change Se nergy customers we need the premise	rvice Reconnect Other e number
Plumbing: Water/Sewer Ta	Number of Baths	Water Heater
Specific Directions to Job from I	illington:	
Subdivision:	Lot	#
(Contractors Name) I am the building owner or my N perform such work on the above	will provide the	labor on this structure. (rade) (rade)
other applicable State and loca	laws, ordinances and regulations.	
Contractor's Company Name 252 DOWL Address	iane couts	Telephone Email Address
to an thoir hens	- btained permis	Date: DIB Consisted license holder to the above listed license holder to the above cannot rent, lease or se

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