

Application # _____

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: ALEXANDER TURLINGTON Phone: 919-817-0210

Owner (s) Mailing Address: 526 MCLAMB RD
COATS, NC 27521

Land Owner Name (s): ALEXANDER TURLINGTON Phone: 919-817-0210

Construction or Site Address: 526 MCLAMB RD

PIN # _____ Parcel # _____

Job Cost: 18909.00 Description of Work to be done _____
REPLACE HP SYSTEM AND DUCT WORK FOR 1ST AND 2ND FLOOR EACH.

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 ALLEN KELLY & COMPANY, IN will provide the MECHANICAL/ELECTRICAL labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 07049/09721, 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.

ALLEN KELLY & COMPANY, INC
Contractor's Company Name
220 A TRYON RD, RALEIGH, NC 27603
Address
07049
License # _____

919-779-4197
Telephone
BRITNEE.R@ALLENKELLY.COM
Email Address

Structure Owner / Contractor Signature: Britnee Ray Date: 07/05/2019

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