

**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: Rhonda Hutchinson Phone: 910 890 4535

Owner (s) Mailing Address: \_\_\_\_\_

Land Owner Name (s): \_\_\_\_\_ Phone: \_\_\_\_\_

Construction or Site Address: 1819 Oldsage Rd., South Erwin NC 28339

PIN # \_\_\_\_\_ Parcel # \_\_\_\_\_

Job Cost: 3,000<sup>00</sup> Description of Work to be done Change out HVAC equipment only.

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 Heat and Air Telephone 910 897 5501  
Contractor's Company Name

724 Turlington Rd., Dunn NC 28334 Email Address bushstone@centurylink.net  
Address

17164  
License #

Structure Owner / Contractor Signature: Kent Johnson / B.S. Date: 7/15/19

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

Application # \_\_\_\_\_

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**Certification of Work Performed By Owner/Contractor**

(Individual Trade Application)

Owner (s) of Structure: Rhonda Hutchinson Phone: 910 890 4535

Owner (s) Mailing Address: \_\_\_\_\_

Land Owner Name (s): \_\_\_\_\_ Phone: \_\_\_\_\_

Construction or Site Address: 1819 Obisige Rd., South Erwin NC 28389

PIN # \_\_\_\_\_ Parcel # \_\_\_\_\_

Job Cost: 150<sup>00</sup> Description of Work to be done Reconnect power

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 Michael Moore will provide the Electrical labor on this structure.  
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 28249L 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.

On Time Electric  
Contractor's Company Name

910 669 5774  
Telephone

252 Park Lane, Coats NC 27521  
Address

\_\_\_\_\_  
Email Address

28249L  
License #

Structure Owner / Contractor Signature: Michael Carter / OS. Date: 7/15/19

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**