

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: Lamy Morgan Phone: _____
Owner (s) Mailing Address: 207 E. H St Erwin

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: _____

PIN # _____ Parcel # _____

Job Cost: \$8000 Description of Work to be done: change air unit

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 MECH labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 17104, 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 Contractor's Company Name Telephone 910 8975501

724 Turnington Rd Erwin Address Email Address Buster@stone

17104 License # @centurylink.net

Structure Owner / Contractor Signature: _____ Date: 08/12/19

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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I Muller will provide the elec 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.

Contractor's Company Name: On time

Telephone: 919 669 7209

Address: 252 Park Lane Courts

Email Address: _____

License #: 28249L

Structure Owner / Contractor Signature: [Signature] Date: 08/12/19

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