

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: Ricky and donna Surles Phone: 919 516 3238
Owner (s) Mailing Address: 400 Montague Rd Angier

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: _____

PIN# _____ Parcel # _____

Job Cost: \$7000 Description of Work to be done: change out upstairs
GSHP

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 7164, 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 Hume
Contractor's Company Name
724 Tunington Rd Dunn
Address
7164
License #

910 897 5501
Telephone

Email Address

Structure Owner / Contractor Signature: [Signature] Date: 08/23/19

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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**Certification of Work Performed By Owner/Contractor
(Individual Trade Application)**

Owner (s) of Structure: Ricky and Donna Surles Phone: 9195163738

Owner (s) Mailing Address: 400 Montegine Rd Lillington

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: _____

PIN# _____ Parcel # _____

Job Cost: \$7000 Description of Work to be done: change out upstairs
SSHP

Mechanical: New Unit With Ductwork _____ New Unit Without Ductwork _____ Gas Piping _____ Other _____

Electrical*: 200 Amp _____ <200 Amp _____ Service Change _____ Service Reconnect _____ Other _____
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Plumbing: Water/Sewer Tap _____ Number of Baths _____ Water Heater _____

Specific Directions to Job from Lillington:

Subdivision: _____ Lot #: _____

I Tammy Patrick will provide the elec labor on this structure.
(Contractor's Name) (Trade) 49104

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.

Patrick Elec Contractor's Company Name Telephone (910) 237-1594

724 Lillington Rd Address 1309 N. Main Email Address
St Lillington

License # 49104

Structure Owner / Contractor Signature: Tammy Patrick Date: 08/23/19

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