

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: Don + Betty Simmons Phone: (910) 8921583

Owner (s) Mailing Address: 111 Simmons dr - Farm

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: _____

PIN# _____ Parcel # _____

Job Cost: _____ Description of Work to be done _____

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 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 HVAC Contractor's Company Name 9108917550 Telephone

724 Tunington Dunn Address _____ Email Address _____

May License # _____

Structure Owner / Contractor Signature: Kent Johnson Date: 09 10/01/19

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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Specific Directions to Job from Lillington:

Subdivision: _____ Lot #: _____

I, Michelle Carr will provide the elec labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 282491, 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
Contractor's Company Name

(919) 669 7209
Telephone

252 PAINE LANE COATS
Address

Email Address

282491
License #

Structure Owner / Contractor Signature: [Signature] Date: 10/01/19

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