

Application # MRES1912-0003

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: Tim Davis Phone: 919 894 1861

Owner (s) Mailing Address: _____

Land Owner Name (s): 271 Phone: _____

Construction or Site Address: 281 Silas Moore Rd., Coats NC 27521

PIN # _____ Parcel # _____

Job Cost: 4900⁰⁰ 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.

JFM Heating and Air 910 897 5501
Contractor's Company Name Telephone

724 Turlington Road, Dunn NC 28534 busterstone@centurylink.net
Address Email Address

17164
License #

Structure Owner / Contractor Signature: Kent Johnson / B.S. Date: 12/3/19

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

4036 2301 0614 2808 1021 057

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Certification of Work Performed By Owner/Contractor

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Owner (s) of Structure: Tim Davis Phone: 919 894 1861

Owner (s) Mailing Address: _____

Land Owner Name (s): 271 Phone: _____

Construction or Site Address: 281 Silas Moore Rd., Coats NC 27521

PIN # _____ Parcel # _____

Job Cost: 150⁰⁰ 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 Tommy Patrick will provide the Electrical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 49104, 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 Electrical Contractors
Contractor's Company Name

910 893 5774
Telephone

1309 N. Main Street, Lillington NC 27546
Address

Email Address

49104
License #

Structure Owner / Contractor Signature: Tommy Patrick / S.S. Date: 12/3/19

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