

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: Patrick Wallace Phone: 919 639 8846

Owner (s) Mailing Address: 288 Homestead Angier
488 Homestead

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: _____

PIN# _____ Parcel # _____

Job Cost: \$ 10000 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.

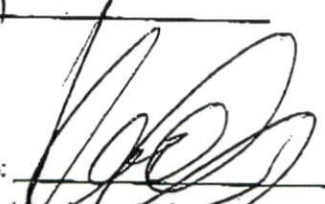
J+M
Contractor's Company Name

9108475501
Telephone

724 Tunington
Address

Email Address

17164
License #

Structure Owner / Contractor Signature:  Date: 12/11/19

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 # MRES1912-0021

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

Owner (s) of Structure: patrick wallace Phone: 9196398846
Owner (s) Mailing Address: 288 Homestead Angier

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: _____

PIN# _____ Parcel # _____

Job Cost: \$10000 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, Tommy Patrick will provide the electric labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 49101, 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 Elle Contractor's Company Name Telephone: (910) 237 1594

1309 N Main St Lillington Address Email Address

49101 License #

Structure Owner / Contractor Signature: [Signature] Date: 12/01/19

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