

Application # _____

Harnett County Central Permitting

PO Box 65 Lillington, NC 27646 - 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: Nancy Freeman Phone: (817)908-6024

Owner (s) Mailing Address: 5465 Marvin Drive Spring Lake, NC
28390

Land Owner Name (s): Nancy Freeman Phone: (817)908-6024

Construction or Site Address: 5465 Marvin Drive Spring Lake, NC 28390

PIN # _____ Parcel # _____

Job Cost: \$5,700 Description of Work to be done HVAC change out of 2.5 ton
split hlp + Electrical reconnect

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 Jeremy Johnson will provide the HVAC + Electrical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 30052/31418-L, 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.

Cape Fear AC & Heating Cape Fear Electrical Services 910-433-8790
Contractor's Company Name Telephone

1139 Robeson Street Fay, NC 28305 info@capefearair.com
Address Email Address

30052/31418-L
License #

Structure Owner / Contractor Signature: Jeremy Johnson Date: 4/15/20

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