

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: Eduardo Mendez Phone: 919-934-0154

Owner (s) Mailing Address: 115 Smith Candle Ln Coats, NC 27521

Land Owner Name (s): Eduardo Mendez Phone: _____

Construction or Site Address: 115 Smith Candle Ln Coats, NC 27521

PIN # _____ Parcel # _____

Job Cost: \$8,200.00 Description of Work to be done Straight Change out

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 Call Pernell, Inc will provide the mechanical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 30087, 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.

Call Pernell, Inc.
Contractor's Company Name
519 S. Brightleaf Blvd Smithfield, NC 27577
Address
30087
License #

919-934-0153
Telephone
js@callpernell.com
Email Address

Structure Owner / Contractor Signature [Signature] Date: 4/20/2020

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 # _____

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Owner (s) of Structure: Eduardo Mendez Phone: 919-934-0154

Owner (s) Mailing Address: 115 Smith Caudbe Ln Coats, NC 27521

Land Owner Name (s): Same Phone: _____

Construction or Site Address: Same

PIN # _____ Parcel # _____

Job Cost: \$150.00 Description of Work to be done Install correct electrical Breakers + connect new unit

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 Michael Sherman will provide the Electrical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 19794-U, 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.

Michael Sherman Electrical
Contractor's Company Name

919-669-6931
Telephone

PO Box 1322 Four Oaks, NC 27524
Address

js@callpernell.com
Email Address

Address

19794-U
License #

License #

Structure Owner / Contractor Signature: Michael Sherman Date: 4/20/2020

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**