Application #	

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: 301 FAUST Phone: 909 528 4234
Owner (s) Mailing Address: 53 POWAS DRIVE
BROADWAY, NC 27505
Land Owner Name (s):Phone:
Construction or Site Address:
PIN # Parcel #
Job Cost: \$7,500.00 Description of Work to be done PACKAGED HEAT PUMP AND DUCTWORK IN CHANGE PACE
1306 to the C 25 10 100 2 14 100
Mechanical: New Unit With Ductwork Other 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: GO 421 TOWARD SANFORD TURE COLT ON COLT O
Subdivision:Lot #:
NORMANS HEATENG AND COURNE CCC Will provide the MECHANICAC labor on this structure. (Contractors Name) (Trade)
I am the building owner or my NC state license number is, 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.
NORMAN'S HEATING AND COOLING LLC 919-410-1866
NORMAN'S HEATING AND COOLING LCC 919-410-1866 Contractor's Company Name 1135 BRIDCEMINE DR. FUGUAY VARINA, NC 27526 Telephone rongld norman @live-com
Address Email Address
License #
Structure Owner / Contractor Signature: Date: 23 SEPTEMBER 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.

Application #	
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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: Dog faust Phone: 909-526-4	234
Owner (s) Mailing Address: 53 Comas Dr.	
Excadual NC 27505	
Land Owner Name (s):Phone:	
Construction or Site Address:	
PIN # Parcel #	
Job Cost: \$2000 Description of Work to be done Quantity with to Packaged heat punp	
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 #:	
(Contractors Name) will provide the Electrical labor on this structure.	
I am the building owner or my NC state license number is, 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.	
Contractor's Company Name Telephone Telephone	Loko
Contractor's company Name (115 Black Rd Robersanville, 10 2787)	
Address Email Address	
License #	
Structure Owner / Contractor Signature: Very Ruberra Date: 9/23	po
By signing this application you affirm that you have obtained permission from the above listed license purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, learning the significant of the signific	

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

the listed property for 12 months after completion of the listed work.