

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: GLADYS HARGROVE Phone: 910-292-0157

Owner (s) Mailing Address: 115 WOMACK STREET
ERWIN, NC 28339

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: _____

PIN # _____ Parcel # _____

Job Cost: \$6,800.00 Description of Work to be done CHANGE OUT PACKAGES
HEAT PUMP

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 _____

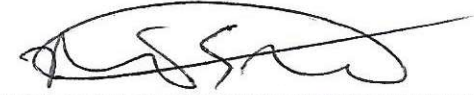
Specific Directions to Job from Lillington: GO 421 SOUTH TOWARDS ERWIN, TURN
LEFT ONTO 55 TOWARDS COATS TURN RIGHT ONTO WOMACK ST.

Subdivision: _____ Lot #: _____

I NORMAN'S HEATING AND COOLING LLC will provide the MECHANICAL labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 29498, 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
Contractor's Company Name Telephone
1135 BRIDLEMEINE DRIVE FUGWAY-VARINA, NC ronaldnorman@live.com
Address 29498 29526 Email Address
License #

Structure Owner / Contractor Signature:  Date: 5 OCTOBER 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**

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Certification of Work Performed By Owner/Contractor

(Individual Trade Application)

Owner (s) of Structure: Blades Helgrove Phone: 910 292 0157

Owner (s) Mailing Address: 115 Womack St.
RWIN, NC 28391

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: _____

PIN # _____ Parcel # _____

Job Cost: \$200.00 Description of Work to be done: Reconnect wire to
next pump

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 Black & Roberson will provide the Electrical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 8700L, 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.

Black & Roberson 252-819-1466
Contractor's Company Name Telephone
1915 Black & Robersonville, NC 27891
Address Email Address
8700L
License #

Structure Owner / Contractor Signature: Kenny Roberson Date: 10/5/20

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**