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 (e) of Structure: Decsila CDV Phone: (740)(A53200			
Chine (e) of Streems.			
Owner (s) Mailling Address: 155 YOYKShive Dr. Cameron			
Land Owner Name (s):Phone:			
Construction or Site Address:			
PIN # Parcel #			
Job Cost: 4813 Description of Work to be done HVAC Charge 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 #:			
ROUF MILE will provide the MOMICAL tabor on this structure. (Contractors Name)			
arm the building owner or my NC state license number is 28280, 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.			
King Heating & Air (919)89531000			
Contractor's Company Name 2d. SANFOYCH LANGUATURE 189500 Email Address 9 Mail. COM			
2829D			
Joseph # Det 12/21/20			
Structure Owner / Contractor Signature:			
by signing this application you affirm that you have obtained permission from the above listed license holder to urchase 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

PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.hamett.org/permits

Certification of Work Performed By Owner/Contractor

(Individual Trade Application)

Owner (s) of Structure:	7 (OX	Hone: (740) LA 53200	
Owner (s) Mailing Address: 155	Jorkshire Dr	·. Caulron	
· ·			
Land Owner Name (s):		hone:	
Construction or Site Address:			
PIN#	Parcel #		
Job Cost: 483 Description of Work	to be doneHVA	(Changeout	
Mechanical: New Unit With Ductwork			
Electrical*: 200 Amp <200 Amp \$ * For Progress Energy custom	ers we need the premise no	mber	
Plumbing: Water/Sewer Tap N	lumber of Baths W	ater Heater	
Specific Directions to Job from Lillington:			
		•	
Subdivision:	Lot#:_		
I Van Clast will provide the (Contractors Name)	(I Dade	13 •	
I am the building owner or my NC state licens	se number is OCTO	, which entities me to	
perform such work on the above structure leg	gally. All work shall comply	with the State Building Code and as	
other applicable State and local laws, ordinal	nces and regulations.	co: - \ o	
URG Eloctrical	·	(919) 354 2225	
Contractor's Company Name	(1	Telephone	
LADI Reeves Dr.	dutord	Email Address	
Address 32452	·	Elikis Askiless	
License #			
Structure Owner / Contractor Signature:	bane Muset	Date: 12/2/20	
to the state of th			
By signing this application you affirm that you have obtained permission into the 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