

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: Genia & Othann Beasley Phone: 210-317-5589

Owner (s) Mailing Address: 330 Hobson Rd
Dunn, NC 28334

Land Owner Name (s): same Phone: same

Construction or Site Address: 330 Hobson Rd, Dunn, NC 28334

PIN # _____ Parcel # _____

Job Cost: \$5613 Description of Work to be done change out ductwork - crawl

Mechanical: New Unit With Ductwork _____ New Unit Without Ductwork _____ Gas Piping _____ Other ductwork

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 _____

4053 0050 / 03/21
0184
0542
650
Pam Johnson

Specific Directions to Job from Lillington:

Subdivision: _____ Lot #: _____

I CAPE FEAR AC+HEATING will provide the MECHANICAL labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is MECH 31493, 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 Contractor's Company Name Telephone 919-322-2000
9400-7 RANSDELL RD, RALEIGH, 27603 Address Email Address pam.johnson@capefearair.com
31493 License #

Structure Owner / Contractor Signature: Julie Ransdell Date: 1-20-21

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