

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: Gail Grimes Phone: 919 971 2878  
 Owner (s) Mailing Address: 1020 Delma Grimes copts 27521

Land Owner Name (s): \_\_\_\_\_ Phone: \_\_\_\_\_  
 Construction or Site Address: \_\_\_\_\_  
 PIN#: \_\_\_\_\_ Parcel #: \_\_\_\_\_

Job Cost: \$7000 Description of Work to be done: change out package  
duct fuel

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, Kent Johnson will provide the Mechanical labor on this structure.  
 (Contractor's Name) (Trade)

I am the building owner or my NC state license number is 1716A, 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.

JEM Heat & Air  
 Contractor's Company Name  
124 Burlington Road, Dunn NC 28534  
 Address  
1716A  
 License #.

910 897 5501  
 Telephone  
busterstone@centurylink.net  
 Email Address

Structure Owner / Contractor Signature: Kent Johnson / B.S. Date: 04/12/21

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

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(Individual Trade Application)

Owner (s) of Structure: Gail Grime Phone: (919) 971-2878  
Owner (s) Mailing Address: 1020 Belma Grimes Rd Coats

Land Owner Name (s): \_\_\_\_\_ Phone: \_\_\_\_\_  
Construction or Site Address: \_\_\_\_\_  
PIN# \_\_\_\_\_ Parcel # \_\_\_\_\_

Job Cost: \$ 200 Description of Work to be done: change out / Reconnection

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: \_\_\_\_\_  
\_\_\_\_\_

Subdivisor: \_\_\_\_\_ Lot # \_\_\_\_\_

I, Tommy Patrick will provide the Electrical labor on this structure.  
(Contractor's Name) (Trade)

I am the building owner or my NC state license number is 49104 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.

Patrick Electrical Contractors  
Contractor's Company Name  
1309 N. Main Street, Lillington NC 2754  
Address  
49104  
License #

910 893 5774  
Telephone  
Email Address \_\_\_\_\_

Structure Owner / Contractor Signature: Tommy Patrick / BS. Date: 04/12/21

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