

Harnett County Central Permitting  
PO Box 65 Lillington, NC 27546 - P: 910-888-7525 - F: 910-888-2788 - www.harnett.org/permits  
Certification of Work Performed By Owner/Contractor  
(Individual Trade Application)

Owner (s) of Structure: Jasmine Torres Phone: (252) 471-0090  
Owner (s) Mailing Address: 30 DOVER CT.

Land Owner Name (s): \_\_\_\_\_ Phone: \_\_\_\_\_

Construction or Site Address: \_\_\_\_\_

PIN # \_\_\_\_\_ Parcel # \_\_\_\_\_

Job Cost: 7187 Description of Work to be done: HVAC Changeout

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

Subdivider: \_\_\_\_\_ Lot #: \_\_\_\_\_

Ray Mills will provide the Mechanical labor on this structure.  
(Contractor's Name) (Trade)

I am the building owner or my NC state license number is 28280, which enables 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  
Contractor's Company Name

300 Wilson Rd. Sanford  
Address

28280  
License #

9198953200  
Telephone

kmhntc@air1845.com  
Email Address  
gmail

Structure Owner / Contractor Signature: [Signature] Date: 4/14/21

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

**Harnett County Central Permitting**  
PO Box 85 Lillington, NC 27548 - P: 910-699-7825 - F: 910-699-2798 - www.harnett.org/permits  
**Certification of Work Performed By Owner/Contractor**  
(Individual Trade Application)

Owner (s) of Structure: Jasmine Torres Phone: (260) 471-0096  
Owner (s) Mailing Address: 30 Dover Ct.

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

Job Cost: 1117 Description of Work to be done: HVAC changeout

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: \_\_\_\_\_

Subcontractor: \_\_\_\_\_ Lot #: \_\_\_\_\_  
Vance Gust will provide the Electrical labor on this structure.  
(Contractor Name) (Trade)

I am the building owner or my NC state license number is 32452, which enables 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.

V.P. Electrical Contractor's Company Name Telephone: (919) 350-2225  
1401 Reeves Dr. Sanford Address Email Address: \_\_\_\_\_  
32452 License #

Structure Owner / Contractor Signature: Vance Gust Date: 4/14/21

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