Application #	
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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: Shonda Sloan	Phone: 910-797-7373
Owner (s) Mailing Address: 371 Stone (1985 D	
Land Owner Name (s):	Phone:
Construction or Site Address: 371 Stone cmss &	FIIONE
PIN # Parcel #	26,
Paice #	
Job Cost: 5650 Description of Work to be done Change	ock on 2 to
Mechanical: New Unit With Ductwork New Unit Without Duct	work X Gas Piping Other
Electrical*: 200 Amp <200 Amp Service Change Service Chang	ervice Reconnect 1 Other Farmers Electronics and the contract of the contract
Plumbing: Water/Sewer Tap Number of Baths	Water Heater
Specific Directions to Job from Lillington:	
Subdivision:Lot	#:
Larry Parker will provide the Mechanical (Tontractors Name)	labor on this structure.
I am the building owner or my NC state license number is _ 2001	
perform such work on the above structure legally. All work shall com-	ply with the State Building Code and all
other applicable State and local laws, ordinances and regulations.	
Certified Heating & Air, Inc	910-858-0000
Contractor's Company Name	Telephone
PO Box 1071 Hope Mills, NC 28348	ehrin.certified@gmail.com
Address	Email Address
20012	
License #	
Structure Owner / Contractor Signature:	Pate: 4-13-21
By signing this application you affirm that you have obtained permiss purchase permits on their behalf. If doing the work as owner you und the listed property for 12 months after completion of the listed work.	lon from the above listed license holder to erstand that you cannot rent, lease or sell

\*Company name, address, & phone must match information on license