

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: Eleanor Dippolito Phone: 919-896-1037

Owner (s) Mailing Address: 35 Birdie's Roost St.
Sanford NC

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: - Same as above -

PIN # _____ Parcel # _____

Job Cost: \$6,642.00 Description of Work to be done 2.5 ton duct system only

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 72 Degrees will provide the mechanical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 31596, 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.

72 Degrees
Contractor's Company Name

3409 Apex Peakway Apex NC 27502
Address

31596
License #

919-777-9777
Telephone

customair@outlook.com
Email Address

Structure Owner / Contractor Signature: Amber Wanner Date: 5/20/2021

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**