

Application # _____

Hainett County Central Permitting
 PO Box 65 Lillington, NC 27346 - Ph: 910-893-7325 - Fx: 910-893-2796 - www.hainett.org/permits
Certification of Work Performed By Owner/Contractor
 (Individual Trade Application)

Owner (s) of Structure: Vann Samuel Phone: (919) 427 2518
 Owner (s) Mailing Address: 491 Chesterfield Lake Rd Lillington

Land Owner Name (s): _____ Phone: _____
 Construction or Site Address: _____

Parcel #: _____

Job Cost: \$6000 Description of Work to be done: change/out recommendations

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 17164, 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.

Jan Heat & Air
 Contractor's Company Name
724 Turbington Road, Dunn NC 28334
 Address
17164
 License #.

910 897 5501
 Telephone
busterstone@centurylink.net
 Email Address

Structure Owner / Contractor Signature: Kent Johnson B.S. Date: 05/19/21

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 65 Lillington, NC 27546 - Ft: 910-893-7525 - Fx: 910-893-2733 - www.harnett.org/permits
Certification of Work Performed By Owner/Contractor
(Individual Trade Application)

Owner (s) of Structure: Vann Somell Phone: (919) 427-2518
Owner (s) Mailing Address: 491 Chesterfield Lake Rd Lillington

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

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

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

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 Telephone: 910 893 5774
1309 N. Main Street, Lillington Rd 28334 Address Email Address: _____
49104 License #

Structure Owner / Contractor Signature: Tommy Patrick / BS. Date: 05/19/21

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