

Application #

Harnett County Central Permitting
 PO Box 65 Lillington, NC 27546 - Fax 910-883-7325 - Fax 910-888-2785 - www.harnett.org/permits
 Certification of Work Performed By Owner/Contractor
 (Individual Trade Application)

Owner (s) of Structure: Brent Ull Phone: (919) 8202511
 Owner (s) Mailing Address: 252 Salt Market St Dunn
242 Salt Market
 Land Owner Name (s): _____
 Construction or Site Address: _____ Phone: _____
 PIN#: _____ Parcel #: _____
 Job Cost: \$6000 Description of Work to be done: HVAC

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.

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

910 897 5501
 Telephone
bustertone@centurylink.net
 Email Address

Structure Owner / Contractor Signature: Kent Johnson J.B.S. Date: 7/13/21
 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

Hamlet County Central Permitting
Box 65 Lillington, NC 27346 - Fax 910-893-7525 - Fax 910-893-2793 - www.hamlet.org/permits
Certification of Work Performed By Owner/Contractor
(Individual Trade Application)

Owner (s) of Structure: Brent Ull Phone: 919 820 2511
Owner (s) Mailing Address: 252 Salt Marsh St Dunn

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

Job Cost \$ 200 Description of Work to be done: Reconnection HVAC

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 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.

Patrick Electrical Contractors
Contractor's Company Name
1309 N. Main Street, Lillington NC 27344
Address
49104
License #:

910 895 5774
Telephone
Email Address: _____

Structure Owner / Contractor Signature: Tommy Patrick / BS. Date: 07/13/21

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