

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: JAMES SLOCUM Phone: 919-539-5454

Owner (s) Mailing Address: 92 JOSEPH ALEXANDER DR
FUQUAY VARINA, NC 27526

Land Owner Name (s): JAMES SLOCUM Phone: 919-539-5454

Construction or Site Address: 92 JOSEPH ALEXANDER DR

PIN # _____ Parcel # _____

Job Cost: _____ Description of Work to be done _____

REPLACE HEAT PUMP WITH MINI SPLIT

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: BALLARD WOODS Lot #: _____

I JAMES SLOCUM will provide the _____ labor on this structure.
(Contractors Name) (Trade)

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

Contractor's Company Name _____ Telephone _____

Address _____ Email Address _____

License # _____

Structure Owner / Contractor Signature: James Slocum Date: 9/13/2021

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**