

Application #

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546 - Pk 910-893-7525 - Fx 910-893-2795 - www.harnett.org/permits
Certification of Work Performed By Owner/Contractor
(Individual Trade Application)

Owner (s) of Structure: JIM Fed and Wendy Crews Phone: 910 810 3501
Owner (s) Mailing Address: 491 W Stewart St Court 5

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

Job Cost: \$12000 Description of Work to be done: change out 2 sshp

Mechanical: New Unit With Ductwork _____ New Unit Without Ductwork Gas Piping Other _____
Electrical: 200 Amp _____ <200 Amp _____ Service Change _____ Service Reconnect _____ Other _____
Plumbing: Water/Sewer Tap _____ Number of Baths _____ Water Heater _____
* For Progress Energy customers we need the premise number

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.

JIM Heat & Air
Contractor's Company Name
124 Turbotown Road, Dunn NC 28334
Address
17164
License #

910 897 5501
Telephone
busterstone@centurylink.net
Email Address

Structure Owner / Contractor Signature: Kent Johnson JB Date: 10/19/21

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
Certification of Work Performed By Owner/Contractor
(Individual Trade Application)

Owner (s) of Structure: Jim and Wendy Crews Phone: (919) 810 3501
Owner (s) Mailing Address: 491 W Stewart St Coats

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

Job Cost \$ 200 Description of Work to be done: RECONNECT HVAC (2)

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 Batts _____ Water Heats _____
Specific Directions to Job from Utility: _____

Subdivision: _____ Lot #: _____

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

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 910 895 5774
Contractor's Company Name Telephone
1309 N. Main Street, Lillington Rd 2834
Address Telephone
49104 License # Email Address

Structure Owner / Contractor Signature: Tommy Patrick / BS. Date: 10/19/21

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