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:	Ann Sahraie	Phone:	
	ess: 229 Pinewinds Dr. Sanford N.C. 27		
I and Owner Name (s):			
	dress:		1
PIN #	Parcel # _		<del>-</del>
Job Cost: 1500.00	_Description of Work to be done_HV	AC Unit Change Out	
Floatrical*: 200 Amn	t With Ductwork New Unit With  o<200 Amp Service Chang gress Energy customers we need the	o : Comico Descript	04
Plumbing: Water/s	Sewer Tap Number of Bath	ns Water Heater	# 1690
Specific Directions to Jo			
Subdivision:		Lot #:	
Thomas Lovely	will annual to a HVAC Work	lahanan	4:
(Contractors N	will provide the HVAC Work	(Trade)	this structure.
	or my NC state license number is _		
	he above structure legally. All work		
		Particular de la companya del la companya de la com	building Code and all
other applicable State a	and local laws, ordinances and regu	llations.	
Lovely Home Solutions		910*992-8818	3
Contractor's Company	Name	Telephone	
116 Northfork Ln. Aberde		•	lutions@gmail.com
Address		Email Addre	SS
19663	_		
License #	_	1/2.	
Structure Owner / Cont	ractor Signature: Thom (a)	Journal Da	te:_11*15*2021
By signing this applicat purchase permits on the	ion you affirm that you have obtaine eir behalf. If doing the work as owne 2 months after completion of the list	er you understand that you	e listed license holder to cannot rent, lease or sell

\*Company name, address, & phone must match information on license