

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546 - Fax 910-893-7525 - Fax 910-893-2785 - www.harnett.org/permits
Certification of Work Performed By Owner/Contractor
(Individual Trade Application)

Owner (s) of Structure: Sarah Padnase Phone: (910) 8978889
Owner (s) Mailing Address: 3180 crawler rd rd enun
Land Owner Name (s): _____ Phone: _____
Construction or Site Address: _____
PIN #: _____ Parcel #: _____
Job Cost: \$6000 Description of Work to be done: change out package

Mechanical: New Unit With Ductwork _____ New Unit Without Ductwork _____ Gas Piping _____ Other _____
Electrical: 200 Amp _____ 400 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.

JTM Heat & Air
Contractor's Company Name
24 Linton Road, Dunn NC 28534
Address
17164
License #.

910 897 5501
Telephone
harnettcountycentralpermits.net
Email Address

Structure Owner / Contractor Signature: Kent Johnson JTS Date: 11/21/21

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: Sarah Padriose Padriose Phone: (910) 897 8889
Owner (s) Mailing Address: 3180 Crawford Rd Enum

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

Job Cost: \$200 Description of Work to be done: change out and reconnection

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 Basins _____ Water Heater _____

Specific Directions to Job from Lillington: _____
Subdivision: _____ Lot #: _____

I, Tommy Patrick (Contractors 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 910 895 5774
Contractor's Company Name Telephone
1309 N. Main Street, Lillington Rd 28334
Address Email Address
49104
License #

Structure Owner / Contractor Signature: Tommy Patrick / BS. Date: 11/21/21

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