

Harnett County Central Permitting
PO Box 65 Lenoir, NC 27545 - Fax 910-883-7525 - Fax 910-883-2283 - www.harnett.org/permits
Certification of Work Performed By Owner/Contractor
(Individual Trade Application)

Owner (s) of Structure: JW Somell Phone: 910 897 5410
Owner (s) Mailing Address: 1573 Tunington Rd Dunn

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

Job Cost: \$4000 Description of Work to be done: change out

Mechanical: New Unit With Ductwork _____ New Unit Without Ductwork _____ Gas Piping _____ Other _____
Electrical: 200 Amp _____ 400 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 Licensior: _____
Subdivision: _____ Lot #: _____

I, Kent Johnson will provide the Mechanical labor on this structure.
(Contractor Name) (Trade)

I am the building owner or my NC state license number is 17164, 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.

JW Heat & Air
Contractor's Company Name
124 Tunington Road, Dunn NC 28534
Address
17164
License #

910 897 5501
Telephone
huststone@a.centurylink.net
Email Address

Structure Owner / Contractor Signature: Kent Johnson JBS Date: 11/29/21

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

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Owner (s) of Structure: JW Sorrell Phone: (910) 8975140
Owner (s) Mailing Address: 1573 Tunington Rd Durham
Land Owner Name (s): _____
Construction or Site Address: _____ Phone: _____
Parcel #: _____

Job Cost: \$200 Description of Work to be done: change out & recannetion

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 Litterator: _____
Subdivision: _____ Lot #: _____

I, Thomas Patrick will provide the Electrical labor on this structure.
(Contractors 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 28334
Address Email Address
49104
License #

Structure Owner / Contractor Signature: Thomas Patrick / BS. Date: 11/29/21

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