

Application # _____

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546 - Ph: 919-893-7525 - Fx: 919-893-2763 - www.harnett.org/permits
Certification of Work Performed By Owner/Contractor
(Individual Trade Application)

Owner (s) of Structure: Keith Wilson Phone: 360-463-6755

Owner (s) Mailing Address: 43 Sandra Ct

Land Owner Name (s): Same Phone: _____

Construction or Site Address: _____

PIN # _____ Parcel # _____

Job Cost: 6/K Description of Work to be done Upstairs HVAC Change Out
Equipment only Replacing outdoor Condenser & AHU in A/B/C

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: Home is located in Neills Creek

Subdivision: Neills Creek Lot #: _____

Jimmy Richardson
Cold South Mechanical will provide the HVAC & Electrical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 31355 & 30624, 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.

Cold South Mechanical
Contractor's Company Name

919-800-7918
Telephone

1929 NC 42 HWY Willow Spring NC 27592
Address

jr@coldsouthnc.com
Email Address

Electrical 30624 Mechanical 31355
License #

Structure Owner / Contractor Signature: [Signature] Date: 2-3-2022

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