

Harnett County Central Permitting
PO Box 88 Lillington, NC 27545 - Fax 910-893-7925 - Fax 910-893-2738 - www.harnett.org/permits
Certification of Work Performed By Owner/Contractor
(Individual Trade Application)

Owner (s) of Structure: Jerry Lee Phone: 9102374791
Owner (s) Mailing Address: 1500 Welwood Rd Dunn

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

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

Mechanical: New Unit With Ductwork _____ New Unit Without Ductwork _____ Gas Piping _____ Other _____
Electrical: 200 Amp _____ <200 Amp _____ Service Change _____ Service Recconnect _____ Other _____
Plumbing: Water/Sewer Tap _____ Number of Basins _____ 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 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.

JEM Heat & Air
Contractor's Company Name
124 Burlington Road, Dunn NC 28334
Address
17164
License #.

910 897 5501
Telephone
husterson@centurylink.net
Email Address

Structure Owner / Contractor Signature: Kent Johnson JES Date: 2/10/22

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

Hamilton County Central Permitting

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

Owner (s) of Structure: Jerry Lee Phone: (910) 237 4791
Owner (s) Mailing Address: 1500 Weir Rd. Dunn

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

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

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

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

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

I am the building owner or my NC state license number is 49104, 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.

Patrick Electrical Contractors 910 893 5774
Contractor's Company Name Telephone:
1309 N. Main Street, Lillington NC 27546
Address Email Address:
49104
License #:

Structure Owner / Contractor Signature: Tommy Patrick / BS Date: 02/10/22

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