

Harnett County Central Permitting
Certification of Work Performed By Owner/Contractor
(Individual Trade Application)

Owner (s) of Structure: Thomas Kuske
Owner (s) Mailing Address: 692 Bill Murray Rd, 27546
Phone: (910) 890-7995

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

Job Cost: \$6000
Description of Work to be done: Change out 2 SSHP

Mechanical: New Unit With Ductwork \_\_\_ New Unit Without Ductwork \_\_\_ Gas Piping \_\_\_ Other \_\_\_
Electrical: 200 Amp \_\_\_ <200 Amp \_\_\_ Service Change \_\_\_ Service Reconnect \_\_\_ Other \_\_\_
Plumbing: Water/Sewer Tap \_\_\_ Number of Baths \_\_\_ Water Heater \_\_\_
Specific Directions to Job from Lillington

Subdivisor:
Lot #:

I, Kent Johnson will provide the Mechanical labor on this structure.
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.

Contractor's Company Name: Sun Heat & Air
Address: 124 Tureington Road, Dunn NC 28534
License #: 17164

910 897 5501
Telephone:
Email Address: hirststone@cedarlink.net

Structure Owner / Contractor Signature: Kent Johnson / B.S. Date: 03/02/22

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

# Harnett County Central Permitting

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

Owner (s) of Structure: Thomas Kuske Phone: (910) 890-7995  
Owner (s) Mailing Address: 692 Ball Aunty Rd Coats

Land Owner Name (s): \_\_\_\_\_ Phone: \_\_\_\_\_  
Construction or Site Address: \_\_\_\_\_  
Parcel #: \_\_\_\_\_

Job Cost: 200 Description of Work to be done: change out HVAC and Reconnection (2)

Mechanical: New Unit With Ductwork \_\_\_\_\_ New Unit Without Ductwork \_\_\_\_\_  
Electrical: 200 Amp \_\_\_\_\_ 400 Amp \_\_\_\_\_ Service Corage \_\_\_\_\_ Service Reconnect \_\_\_\_\_ Other \_\_\_\_\_  
Plumbing: Water/Sewer Tap \_\_\_\_\_ Number of Bats \_\_\_\_\_ Water Heater \_\_\_\_\_  
*\* For Progress Energy customers we need the premise number*

Specific Directions for Job from Litterator: \_\_\_\_\_  
Subdivision: \_\_\_\_\_ Lot #: \_\_\_\_\_

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

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.

Contractor's Company Name: Patrick Electrical Contractors Telephone: 910 895 5774  
Address: 1309 N. Main Street, Lillington Rd 2834 Email Address: \_\_\_\_\_  
License #: 49104

Structure Owner / Contractor Signature: Tommy Patrick / BS Date: 3/2/22

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