Application	#
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PO Box 65 Lillington, NC 27546 - Ph. 910-893-7525 - Fx: 910-893-2793 - www.harnett.org/permits Certification of Work Performed By Owner/Contractor (Individual Trade Application)

wner (s) of Structure: Chantel Pearson	Phone: 910-528-7482
wner (\$) Mailing Address: 11 Albert Ct Sanford NC 27332	
wner (\$) Mailing Address. The Albert Of Gamera Road	
and Owner Name (s):	Phone:
and Owner Name (s):	
onstruction or Site Address:Parcel #	
N#	
bb Cost: 5,00.00 Description of Work to be done Goodman	14 SEER 2 Ton Split System imp with 10kw Electric Heat
Mechanical: New Unit With Ductwork New Unit Without Ductv	work Gas Piping Other
Electrical*: 200 Amp <200 Amp Service Change Service   * For Progress Energy customers we need the premise	o name.
Plumbing: Water/Sewer Tap Number of Baths	Water Heater
Specific Directions to Job from Lillington:	
Supdivision:Lc	ot #:
Honest Air L.L.C. will provide the Mechanical	
(Contractors Name)	Trade)
(Contractors Name)  I am the building owner or my NC state license number is 34140	, which entities file to
perform such work on the above structure legally. All work shall co	mply with the State Building Code and a
other applicable State and local laws, ordinances and regulations.	
	910.849.8818
Honest Air L.L.C. Contractor's Company Name	Telephone
2026 Hope Mills RdFayetteville28304	Honestairdispatch@gmail.com
Address	Email Address
34140	
License #	Date: 4/20/22
Structure Owner / Contractor Signature:	

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

Application	#	
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Harnett County Central Permitting
PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.harnett.org/permits Certification of Work Performed By Owner/Contractor (Individual Trade Application)

Owner (s) of S	Structure: Chantel Pearson	Phone: 910-528-7482
Owner (s) Mai	iling Address: 11 Albert Ct Sanford NC 2733	2
	Name (s):	Phone:
Construction of	or Site Address:	
PIN #	Parcel #	
Job Cost: \$5	5,000.00 Description of Work to be done <u>Goodn</u> Hea	nan 14 SEER 2 Ton Split System t Pump with 10kw Electric Heat
Mechanical:	New Unit With Ductwork New Unit Without D	ouctwork Gas Piping Other
Electrical*:	200 Amp <200 Amp Service Change * For Progress Energy customers we need the pro-	_ Service Reconnect Other emise number
Plumbing:	Water/Sewer Tap Number of Baths	Water Heater
Specific Direc	ctions to Job from Lillington:	
Subdivision:		Lot #:
Wo's Electric	will provide the Electrical ntractors Name)	(Trade) labor on this structure.
(Col	ntractors Name)  ding owner or my NC state license number is 19628	BU which entitles me to
	n work on the above structure legally. All work sha	
	able State and local laws, ordinances and regulation	
other applica	ible State and local laws, ordinances and regulation	
Wo's Electric		910-850-5495
	Company Name	Telephone
-	Red Springs, NC 28377	Email Address
Address 19628U		Email / tearses
License #		
Structure Ov	wner / Contractor Signature:	Date: 4/20/22

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