

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 Structure: Phillip Bullwinkle Phone: 919 499 4309
Owner (s) Mailing Address: 303 Clearwater Harbor

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: _____

PIN # _____ Parcel # _____

Job Cost: \$1140 Description of Work to be done HP split 2.5ton

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:

Subdivision: _____ Lot #: _____

I Roy Mills will provide the Mechanical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 28280, 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.

King Heating & Air
Contractor's Company Name
232 Wilson Rd.
Address
28280
License #

9198953600
Telephone
kinghtyair189@aol.com
Email Address
gmail

Structure Owner / Contractor Signature: [Signature] Date: 4/26/22

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

Application # _____

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Certification of Work Performed By Owner/Contractor

(Individual Trade Application)

Owner (s) of Structure: Phillip Bullwinkle Phone: 9194994309

Owner (s) Mailing Address: 303 Clearwater Harbor Sanford

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: _____

PIN # _____ Parcel # _____

Job Cost: \$140 Description of Work to be done: HP split 2.5 ton

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:

Subdivision: _____ Lot #: _____

I, Vance Aust will provide the Electric labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 32452, 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.

VRG Electric
Contractor's Company Name
4401 Keele's Dr Sanford
Address
325 32452
License #

9193562225
Telephone
kingtdair1895@gmail.com
Email Address

Structure Owner / Contractor Signature: Vance Aust Date: 4/26/22

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**