

Application # _____

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: Lisa + Negl Avery Phone: 919-820-0873 *Neal*
Owner (s) Mailing Address: 228 Armstrong St
Dunn NC 28334

Land Owner Name (s): _____ Phone: _____
Construction or Site Address: 228 Armstrong St

PIN # _____ Parcel # _____

Job Cost: 2000.00 Description of Work to be done Reset tank + Re-run gas lines

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 ~~am~~ McChambs LP Gas will provide the gas piping labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 17517, 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.

McChambs LP Gas Telephone 919-894-3842
Contractor's Company Name
3469 Nc 242 South Benson NC Info at McChambsLPGas.com
Address Email Address

License # _____
Structure Owner / Contractor Signature: [Signature] Date: 9/5/22

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

Call For Payment
Thank Timmy