

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: Joel Sostre Phone: 912-655-7802

Owner (s) Mailing Address: 49 Guilford Ct Spring Lake N 28390

Land Owner Name (s): Same As Above Phone: _____

Construction or Site Address: _____

PIN # _____ Parcel # _____

Job Cost: 7,000 Description of Work to be done Putting in a 4.0 ton split system

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 Blanton's Air, Plumbing & Electr will provide the Mechanical/Electrical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 20688/34883, 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.

Blanton's Air, Plumbing & Electric

Contractor's Company Name

4514 Bragg Blvd Fayetteville NC 28303

Address

20688/34883

License #

910-229-4185

Telephone

LORI@BLANTONSAIR.COM

Email Address

Structure Owner / Contractor Signature: *Lori Sellers* Date: 6/6/22

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 n

Lori Sellers
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