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 (e) of	Structure: Joshua Nolan	Ph	one: 910-988-6624
Owner (s) or	Structure: 003/144 Punhar	Dr Lillington NC 27546	
Owner (s) Ma	alling Address. 420 Danbar		
	N (2):	Ph	one:
Land Owner	Name (s):		
Construction	or Site Address:		
PIN #		Parcel #	
- Ф	= 000 00 Description of Wo	ork to be done Goodman 14	SEER 1.5 ton split system
Job Cost: \$	5,000.00 Description of vvc	heat num	p with 5kw electric heat
		near pain	p With Onto State
Mechanical:			Gas Piping Other
Electrical*:	<ul> <li>For Progress Energy cust</li> </ul>	Service Change Service omers we need the premise nu	mbei
Plumbing:	Water/Sewer Tap	Number of Baths Wa	ater Heater
Specific Dire	ections to Job from Lillington:		
0. 1. 45. 55. 50.		Lot #:	
Subdivision.			
. Wo's Electr	ic will provid	te the Electrical	labor on this structure.
(Co	ic will provide ontractors Name)	(Trade	
I am the bui	ilding owner or my NC state li	cense number is 19628U	which entitles me to
perform suc	h work on the above structur	e legally. All work shall comply	with the State Building Code and all
	able State and local laws, or		
Other applic	able otate and lood, lawer, and		
Wo's Electric			910-850-5495
Contractor's	s Company Name		Telephone
575 Cope R	d Red Springs, NC 28377		E
Address			Email Address
19628U			
License #			
01 1 0	Owner / Contractor Signature:	John Wilson	Date: 6/15/22
Structure C	owner / Contractor Signature.		

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

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wner (s) of Structure: Joshua Nolan		Phone: 910-988-66	24
wner (s) of Structure: JOSHUA INDIAII	Da Lillington NC 275	46	
wner (s) Mailing Address: 428 Dunbar	Dr Lillington NC 275	40	
4		Dhanai	
and Owner Name (s):		Pnone:	
-ttion or Cito Address:			
IN #	Parcel #		
ob Cost: 5,00.00 Description of Wor	k to be done Goodma		split system
Mechanical: New Unit With Ductwork	_ New Unit Without Duct	work _ Gas Piping	Other
Electrical*: 200 Amp <200 Amp * For Progress Energy custo	omers we need the premi	se namber	ther
Plumbing: Water/Sewer Tap	Number of Baths	Water Heater	
Specific Directions to Job from Lillington:			
	1	nt #	
Subdivision:	L.	O( #.	
Managet Air L.I. C	- the Mechanical	labor on this	structure.
Honest Air L.L.C. will provid	e the	Trade)	
I am the building owner or my NC state lice	cense number is 34140	which entit	tles me to
perform such work on the above structure	e legally. All work shall co	omply with the State Build	ding Code and
other applicable State and local laws, ord	inances and regulations.		
other applicable State and local laws, ore			
Honest Air L.L.C.		910.849.8818	
Contractor's Company Name	The state of the s	Telephone  Honestairdispatch(	@gmail.com
2026 Hope Mills RdFayetteville28304	The second secon	Email Address	wyman.com
Address 34140		Email Address	
License #			
Structure Owner / Contractor Signature:	Erin Cashwell	Date:_	6/15/22
By signing this application you affirm that purchase permits on their behalf. If doing	htained norm	directoria trial	ited license hold not rent, lease o

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

the listed property for 12 months after completion of the listed work.