Application #	Control of the second second second

**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: Owner (s) Mailing Address: Land Owner Name (s): \_ Phone: Construction or Site Address: PIN# Parcel# Job Cost: Description of Work to be done Mechanical: New Unit With Ductwork \_\_\_ New Unit Without Ductwork <u>√</u> Gas Piping \_\_\_ Electrical\*: <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 #: will provide the labor on this structure. I am the building owner or my NC state license number is , 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. Structure 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

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

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

PO Box 65 Lillington, NC 27546 - Ph: 910-89 Certification of Work P	by Central Permitting 3-7525 - Fx: 910-893-2793 - www.harnett.org/permits erformed By Owner/Contractor Trade Application)  Phone: (919) 4-78-7622
Owner (s) Mailing Address: 1458 Pond	exosa Trail
Land Owner Name (s):	Phone:
Construction or Site Address:	
PIN # Pa	rcel#
Job Cost: 100 Description of Work to be de	one HVAC Changeout/Southe
Mechanical: New Unit With Ductwork New Ur	it Without Ductwork Gas Piping Other
	Change Service Reconnect Other
Plumbing: Water/Sewer Tap Number	
Specific Directions to Job from Lillington:	
Subdivision:	Lot #:
ROUMS will provide the N	chanical labor on this structure.
(Gontractors Name)  I am the building owner or my NC state license numb	per is 2020 , which entitles me to
	work shall comply with the State Building Code and all
other applicable State and local laws, ordinances and	
King Heating & Air	9198953600
Contractor Company Name  Address - 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Linght dir 1895a g Mai

Application #

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.

Structure Owner / Contractor Signature:

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