

Owner (s) of Structure: Fred Cummings Phone: (910) 890 3043
 Owner (s) Mailing Address: 145 Anna Lillington

Land Owner Name (s): _____ Phone: _____
 Construction or Site Address: _____
 PIN#: _____ Parcel #: _____

Job Cost: \$200 Description of Work to be done: change out / reconnect

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 Heats _____

Specific Directions to Job from Lillington:

Subdivision: _____ Lot #: _____

I, Thomas Patrick will provide the Electrical labor on this structure.
 (Contractor Name) (Trade)

I am the building owner or my NC state license number is 49104, which enables 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.

Patrick Electrical Contractors
 Contractor's Company Name
1309 N. Main Street, Lillington Hill 2834
 Address
49104
 License #

910 895 5774
 Telephone
 Email Address

Structure Owner / Contractor Signature: Thomas Patrick / BS Date: 07/21/22

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

Owner (s) of Structure: Fred Cummings Phone: (910) 890 3643
Owner (s) Mailing Address: 145 Anna St Lillington

Land Owner Name (s): _____ Phone: _____
Construction or Site Address: _____
Parcel #: _____

Job Cost: \$6000 Description of Work to be done: change out split
Attic / Reconnection

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 Basins _____ Water Heater _____

Specific Directions to Job from Lillington: _____

Subdivision: _____ Lot #: _____

Kent Johnson will provide the Mechanical labor on this structure.
(Contractor's Name) (Trade)

and the building owner of my NC state license number is 17164, which enables 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.

Team Heat & Air
Contractor's Company Name
124 Turbington Road, Dunn, NC 28534
Address
17164
License #

910 897 5501
Telephone
hustons@centurylink.net
Email Address

Structure Owner / Contractor Signature: Kent Johnson B.S. Date: 07/21/22

By signing this application you affirm that you have obtained permission from the above listed license holder to chase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or sell listed property for 12 months after completion of the listed work.

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