

Application # _____

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546 - Pk 910-893-7525 - Fx 910-893-2735 - www.harnett.org/permits
Certification of Work Performed By Owner/Contractor
(Individual Trade Application)

Owner (s) of Structure: Cornelia Collins Phone: (910) 891 6902
Owner (s) Mailing Address: 657 Jimmichan Rd Lillington

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

Job Cost: \$4000 Description of Work to be done: Change out

Mechanical: New Unit With Ductwork New Unit Without Ductwork Gas Piping Other _____
Electrical: 200 Amp 400 Amp Service Change Service Reconnect Other _____
Plumbing: Water/Sewer Tap Number of Basins _____ Water Heater _____
* For Progress Energy customers we need the premise number

Specific Directions to Job from Lillington: _____

Subdivision: _____ Lot #: _____

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

I am the building owner or 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.

JEM Heat & Air
Contractor's Company Name
24 Turbington Road, Dunn NC 28334
Address
17164
License #

910 897 5501
Telephone
huststone@centurylink.net
Email Address

Structure Owner / Contractor Signature: Kent Johnson / JS Date: 08/01/22

* 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

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546 - Fax 910-893-7525 - Fax 910-893-2788 - www.harnett.org/permits
Certification of Work Performed By Owner/Contractor
(Individual Trade Application)

Owner (s) of Structure: Comilla Collins Phone: 910 891-6902
Owner (s) Mailing Address: 057 Jim Christian Rd Lillington

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

Parcel # _____

Job Cost: \$ 700 Description of Work to be done: check out / recommendation

Mechanical: New Unit With Ductwork _____ New Unit Without Ductwork _____ Gas Piping _____ Other _____
Electrical: 200 Amp _____ 400 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, Tommy Patrick will provide the Electrical labor on this structure.
(Contractor's Name) (Trade)

I am the bearing 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 applicable State and local laws, ordinances and regulations.

Patrick Electrical Contractors
Contractor's Company Name
309 N. Main Street, Lillington NC 27544
Address
49104
License #

910 895 5774
Telephone
Email Address _____

Signature of Owner / Contractor: Tommy Patrick / BS Date: 08/01/24

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

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