

Application # _____

Harnett County Central Permitting
PO Box 05 Lillington, NC 27646 - Ph: 910-893-7625 - Fx: 910-893-2793 - www.harnett.org/permits
Certification of Work Performed By Owner/Contractor
(Individual Trade Application)

Owner (s) of Structure: Garrick King Phone: 9199305417
Owner (s) Mailing Address: 275 Maplewood Dr Sanford NC

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: _____

PIN # _____ Parcel # _____

Job Cost: \$11400 Description of Work to be done: 3.5 ton Heat pump split, Attic

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 #: _____

Rou Mills will provide the Mechanical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 28280, 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.

King Heating & Air
Contractor's Company Name

232 Wilson Rd Sanford
Address

28280
License #

9198953000
Telephone

kinghtair1895@a
Email Address gmail.com

Structure Owner / Contractor Signature: [Signature] Date: 8/3/22

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

Application # _____

Harnett County Central Permitting
PO Box 65 Lillington, NC 27648 - Ph: 910-893-7625 - Fx: 910-893-2763 - www.harnett.org/permits
Certification of Work Performed By Owner/Contractor
(Individual Trade Application)

Owner (s) of Structure: Garrick King Phone: 9199305407
Owner (s) Mailing Address: 275 Maplewood Dr Sanford NC

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: _____

PIN # _____ Parcel # _____

Job Cost: \$11,400 Description of Work to be done: 3.5 ton HP split, Attic

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, Vance Gust will provide the Electric labor on this structure.
(Contractor Name) (Trade)

I am the building owner or my NC state license number is 32452, 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.

VR Electrical
Contractor's Company Name
1401 Reeves Dr. Sanford
Address
32452
License #

91935102225
Telephone
kinghtclair1895@gmail.com
Email Address

Structure Owner / Contractor Signature: Vance Gust Date: 8/3/22

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