

Application # _____

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: Robert Brizzi Phone: _____

Owner (s) Mailing Address: 263 Pineridge Cove Sanford 27332

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: _____

PIN # _____ Parcel # _____

Job Cost: \$14,953.⁰⁰ Description of Work to be done Hvac changeout 2 ton + 3 ton
Hp Split Both - Attic/Scuttle

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 Electrical labor on this structure.
(Contractors 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.

VKG Electrical
Contractor's Company Name
6401 Reeves Dr., Sanford
Address
32452
License #

9193562225
Telephone
Kinghtgair1895@gmail.com
Email Address

Structure Owner / Contractor Signature: Vance Gust Date: 8-23-22

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**

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Certification of Work Performed By Owner/Contractor
(Individual Trade Application)

Owner (s) of Structure: Robert Brizzi Phone: 727-455-2589

Owner (s) Mailing Address: 263 Pine ridge Cove., Sanford 27332

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: _____

PIN # _____ Parcel # _____

Job Cost: \$14,953.⁰⁰ Description of Work to be done Hvac Changout 2ton + 3ton
HP Split Both - Attic / Scuttle

Mechanical: New Unit With Ductwork ___ New Unit Without Ductwork Gas Piping ___ Other ___

Electrical*: 200 Amp ___ <200 Amp ___ Service Change ___ Service Reconnect ___ Other ___
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Plumbing: Water/Sewer Tap ___ Number of Baths ___ Water Heater ___

Specific Directions to Job from Lillington:

Subdivision: _____ Lot #: _____

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

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.

King Heating + Air
Contractor's Company Name
232 Wilson Rd., Sanford 27332
Address
28280
License #

919 895 3600
Telephone
Kinghtair1895@gmail.com
Email Address

Structure Owner / Contractor Signature: [Signature] Date: 8-23-22

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**