Application #	

Harnett County Central Permitting

Mailing Address - PO Box 65 Lillington, NC 27546 - Physical Address - 420 McKinney PKWY Lillington NC 27546
Ph.: 910-893-7525 - Fax: 910-893-2793 - www.harnett.org/permits
Certification of Work Performed By Owner/Contractor (Individual Trade Application)

Owner (s) of Structure: Progress Residental Phone: 919-435-4845
Owner (s) Mailing Address:
Land Owner Name (s):Phone:  Construction or Site Address: 40 Strawberry Hill Ln. Fuguay Varina  PIN#Parcel#
Job Cost (Required): (0,000 Description of Work to be done Replace existing Package
Mechanical: New Unit With Ductwork New Unit Without Ductwork Gas Piping Other
Electrical*: 200 Amp <200 Amp Service Change Service Reconnect Other Reconnect Reconnect Reconnect Reconnect Reconnect Reconnec
Plumbing: Water/Sewer Tap Number of Baths Water Heater
Specific Directions to Job from Lillington: Not Sure
Subdivision: NA Lot #: NA
Michael S Holmes will provide the HVAC   labor on this structure. (Contractors Name) (Trade)   am the building owner or my NC state license number is 34743   , 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.
Michael S Holmes 919-920-5619 Contractor's Company Name Telephone
653 Dr. Danie H. Jones Blud. Princeton Carolinaairrepair, travis @ gmail.com Address Email Address
34743 License #
Structure Owner / Contractor Signature: 16th all Date: 9-15-72
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

Faxed or Mailed application could have an approximately 1-5 day process time