

FAX COVER SHEET



CAPE FEAR
Air Conditioning & Heating Company, Inc.

HEATING • COOLING • INDOOR AIR QUALITY

Address: 1139 Robeson St. Fayetteville NC 28305

Phone: (910) 483-8790 / Fax: (910) 483-8737

Email: Info@CapeFearAir.com

Web: www.CapeFearAir.com

TO: Harnett County
Central Permitting

DATE:

COMPANY NAME:

Inspections/Permitting

FAX#: 910-893-2793

FROM:

Kristin, juala@capefearair.com

of pages:
(Including Cover)

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NOTES: Please see the following mechanical/
electrical permit application for processing.

Please charge the following credit card:

Name: Dave Burks Visa # 4053013300607273

Exp: 03/25. Code: 634 Thank you!

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: Ana Zsigmond Phone: 914-257-1753

Owner (s) Mailing Address: 336 Anderson Rd
Linden, NC 28356

Land Owner Name (s): Ana Zsigmond Phone: 914-257-1753

Construction or Site Address: 336 Anderson Rd Linden NC 28356

PIN # _____ Parcel # _____

Job Cost (Required): \$ 7891 Description of Work to be done Duct Work Replacement
Only

Mechanical: New Unit With Ductwork ___ New Unit Without Ductwork ___ Gas Piping ___ Other Duct Work Replacement Only
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 Jeremy Johnson will provide the mechanical labor on this structure.
(Contractor's Name) (Trade)

I am the building owner or my NC state license number is 30052 H2, 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.

Cape Fear A/C + Heating Telephone 910 483-8790
Contractor's Company Name
1139 Robeson St Fayetteville NC 28305 Address
30052 H2 Email Address kristin.juala@capefearair.com
License # _____

Structure Owner / Contractor Signature: Jeremy Johnson Date: 10/7/22

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