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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: Owner (s) Mailing Address. Land Owner Name (s): Phone: Construction or Site Address: PIN# Parcel # Job Cost (Required): / Description of Work to be done 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 Water/Sewer Tap ____ Number of Baths ____ Plumbing: Water Heater Specific Directions to Job from Lillington: Lot #: Subdivision: will provide the I Vance Gust 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. VRG Electrical 919-356-2225 Contractor's Company Name Telephone 6401 Reeves Dr., Sanford NC 27332 kinghtgair1895@gmail.com Address **Email Address** 32452 License # Structure Owner / Contractor Signature: _

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

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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)

Phone: 406 -581-00 Owner (s) of Structure: \ Owner (s) Mailing Address: 50 Land Owner Name (s): Phone: Construction or Site Address: PIN# Parcel # 335. Description of Work to be done Wac Ch Job Cost (Required): Mechanical: New Unit With Ductwork _ New Unit Without Ductwork X 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 Roy F. Mills III 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 919-895-3600 Contractor's Company Name Telephone 232 Wilson Rd., Sanford NC 27332 kinghtgair1895@gmail.com Address **Email Address** 28280 License # Structure Owner / Contractor Signature: _ By signing this application, you affirm that you have obtained perphysion 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

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