Application #\_

PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-8	93-2793 - www.harnett.org/permits
Certification of Work Performed By Own	ner/Contractor
(Individual Trade Applicatio	
Owner (s) of Structure: CHAUNCEY HARRIS	Phone: 678.592.3134 TEXT
Owner (s) Mailing Address: 273 SKYCROFT DRIVE	
SANFORD, NC 27332	
Land Owner Name (s): CHAUNCEY HARRIS	Phone: 678.592.3134 TEXT
Construction or Site Address: 273 SKYCROFT DRIVE, SANFORD,	NC 27332
PIN # Parcel #	
Job Cost: \$10,929.00 Description of Work to be done CHANGE OU	
Mechanical: New Unit With Ductwork New Unit Without Ductwork	
Electrical*: 200 Amp <200 Amp Service Change Service   * For Progress Energy customers we need the premise r	ce Reconnect Other
Plumbing: Water/Sewer Tap Number of Baths V	Vater Heater
Specific Directions to Job from Lillington:	
Subdivision:Lot #:	
I BASS AIR CONDITIONING will provide the MECHANICAL (Contractors Name) (Trad am the building owner or my NC state license number is 33586	e) , 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.	
BASS AIR CONDITIONING COMPANY, INC	910-424-3570
Contractor's Company Name	Telephone
3261 NATAL STREET, FAYETTEVILLE NC 28306	STACY@BASS-AIR.COM
Address 33586	Email Address
License #	
Structure Owner / Contractor Signature:	Date: 11.16.2022
By signing this application you affirm that you have obtained permission purchase permits on their behalf. If doing the work as owner you unders the listed property for 12 months after completion of the listed work.	from the above listed license holder to stand that you cannot rent, lease or sell

**Harnett County Central Permitting** 

\*Company name, address, & phone must match information on license

ELECTRICAL BY: ALLMAN ELECTRIC 6136-U

Application #\_\_

PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893	3-2793 - www.harnett.org/permits	
Certification of Work Performed By Owner/Contractor (Individual Trade Application)		
Owner (s) of Structure: ARMANDO MUNOZ	Phone: 915.658.6440 TEXT	
Owner (s) Mailing Address: 94 WINGED FOOT DRIVE		
BUNNLEVEL, NC 28323		
Land Owner Name (s): SAME AS ABOVE	Phone:	
Construction or Site Address:		
PIN # Parcel #		
Job Cost: \$18,885.00 Description of Work to be done		
CHANGE OUT 3 TON S/S HP DOWNSTAIRS & 2 TON S/S UPSTAIRS		
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 BASS AIR CONDITIONING will provide the MECHANICAL labor on this structure.  (Contractors Name) (Trade)		
I am the building owner or my NC state license number is 33586, 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.		
BASS AIR CONDITIONING COMPANY, INC	910-424-3570	
Contractor's Company Name	Telephone	
3261 NATAL STREET, FAYETTEVILLE NC 28306	STACY@BASS-AIR.COM	
Address 33586	Email Address	
License #		
Structure Owner / Contractor Signature:   Discipling this contractor Signature:	•	
Circulate Children Contractor Signature.	Date: // · 23-77	

\*Company name, address, & phone must match information on license