Application #		
Application #	Personal and the state of the s	

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: Travis A	HLEN Phone: 253-426-8452		
		orse Whisperer Ln		
		ton NC. 27546		
Land Owner	The second secon	Phone:		
		Parcel #		
Job Cost (R	equired): 0,027 Desci	ription of Work to be done HVac Changeout 3.5		
ton H	2 Split	The second secon		
Mechanical:	New Unit With Ductwork	k New Unit Without Ductwork X Gas Piping Other		
Electrical*:	* For Progress Energy of	Service Change Service Reconnect Other customers we need the premise number		
Plumbing:	Water/Sewer Tap	Number of Baths Water Heater		
Specific Direc	ctions to Job from Lillingto	on:		
Opcomo Dire	out of the total from Emiliate	<u>n.</u>		
Subdivision:		Lot #:		
I Roy F. Mill	s III will pro	ovide the Mechanical labor on this structure.		
(00)	maciois Name)	(Trade)		
		e license number is, which entitles me to		
		ure legally. All work shall comply with the State Building Code and all		
other applicat	ble State and local laws, o	ordinances and regulations.		
	King Handan O Air			
Contractor's C	King Heating & Air Company Name	919-895-3600 Telephone		
	Rd., Sanford NC 27332	그들은 그들은 하는 그들은 그렇게 들어 살아보니까요? 그는 사람들이 하면 없이 모든 그를 모르겠다고 하는 그리고 있다.		
Address kinghtgair1895@gmail.com Email Address				
28280				
License #		2,00/2		
Structure Own	ner / Contractor Signature	: LUST//WW/Date: 12-28-22		
By signing this ap behalf. If doing the listed work.	plication, you affirm that you ha e work as owner you understand	ve/obtained permission from the above listed license holder to purchase permits on their d that you cannot rent, lease or sell the listed property for 12 months after completion of the		

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

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

Application #_	

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Owner (s) of	Structure:	ravis Allen		Phone:		
Owner (s) M	ailing Address	:25 Horse	Whisperer	- Un		
		Lillington	NC ATE	246		
Land Owner	Name (s):		Brown Ballin			
Construction	or Site Addres	SS:				
PIN #						
Job Cost (R	equired):		ork to be done	vac Ch	angout 3.5	
Mechanical:				100	as Piping Other	
Electrical*:	200 Amp * For Progres	<200 Amp Services Energy customers w	ce Change Serve need the premis	ervice Recor	nnect Other	
Plumbing:		er Tap Numbe			ater	
Specific Direct	ctions to Job fro					
Subdivision: _	salas a Januari		Lot	#:		
Vance Gus		_ will provide the	Electrical		labor on this structure	
am the buildi	ng owner or m	y NC state license nur	nber is32452	100 77	, which entitles me to	
erform such v	work on the ab	ove structure legally.	All work shall com	ply with the	State Building Code and a	
ther applicable	le State and lo	cal laws, ordinances a	nd regulations.			
	VRG Electrica	,				
Contractor's Company Name				919-356-2225 Telephone		
6401 Reeves Dr., Sanford NC 27332			kinghtgair1895@gmail.com Email Address			
32452				Liliali A	uuless	
cense #						
ructure Owne	er / Contractor :	Signature: <u>Von</u>	cesust		_ Date: 12 - 24 - 22	
signing this appl	ication, you affirm	that you have obtained per	mission from the above	e listed license		

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

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

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