

**Hamett County Central Permitting**  
 PO Box 65 Lillington, NC 27546 - Fax 910-893-7525 - Fax 910-893-2735 - www.hamett.org/permits  
 Certification of Work Performed By Owner/Contractor  
 (Individual Trade Application)

Owner (s) of Structure: Lonnie Daman Phone: (910) 897 7206  
 Owner (s) Mailing Address: 52 S. Orange Courts

Land Owner Name (s): \_\_\_\_\_ Phone: \_\_\_\_\_  
 Construction or Site Address: \_\_\_\_\_

Parcel #: \_\_\_\_\_

Job Cost: 6000 Description of Work to be done: change out package ltr reconnection

Mechanical: New Unit With Ductwork \_\_\_\_\_ New Unit Without Ductwork \_\_\_\_\_ Gas Piping \_\_\_\_\_ Other \_\_\_\_\_

Electrical: 200 Amp \_\_\_\_\_ 400 Amp \_\_\_\_\_ Service Change \_\_\_\_\_ Service Reconnect \_\_\_\_\_ Other \_\_\_\_\_  
 \*For Progress Energy customers we need the premise number

Plumbing: Water/Sewer Tap \_\_\_\_\_ Number of Basins \_\_\_\_\_ Water Heater \_\_\_\_\_

Specific Directions to Job from Lillington: \_\_\_\_\_

Subdivision: \_\_\_\_\_ Lot #: \_\_\_\_\_

I, Kent Johnson will provide the Mechanical labor on this structure.  
 (Contractor Name) (Trade)

I am the building owner or my NC state license number is 17164, which enables 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.

J&A Heat & Air  
 Contractor's Company Name  
24 Lillington Road, Dunn NC 28334  
 Address  
17164  
 License #

910 897 5501  
 Telephone  
lustrstone@centurylink.net  
 Email Address

Structure Owner / Contractor Signature: Kent Johnson B.S. Date: 12/29/22

By signing this application you affirm that you have obtained permission from the above listed license holder purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or use the listed property for 12 months after completion of the listed work.

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

Certification of Work Performed By Owner/Contractor  
(Individual Trade Applications)

Owner (s) of Structure: LONNIE NORMAN Phone: (910) 897-7200

Owner (s) Mailing Address: 52 S. Orange St Lillington

Land Owner Name (s): \_\_\_\_\_ Phone: \_\_\_\_\_

Construction or Site Address: \_\_\_\_\_

PIN#: \_\_\_\_\_ Parcel #: \_\_\_\_\_

Job Cost: \$ 200 Description of Work to be done: CHANGE OUT PACKAGED HP

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

Plumbing: Water/Sewer Tap \_\_\_\_\_ Number of Bais \_\_\_\_\_ Water Heats \_\_\_\_\_

Specific Directions to Job from Lillington

Division \_\_\_\_\_ Lot # \_\_\_\_\_

Tommy Patrick will provide the Electrical labor on this structure.  
(Contractor Name) (Trade)

I, the Issuing Owner of my NC state license number is 49104, which enables me to  
perform such work on the above structure legally. All work shall comply with the State Building Code and all  
applicable State and local laws, ordinances and regulations.

Patrick Electrical Contractors

Contractor's Company Name  
109 N. Main Street, Lillington NC 27546

910 895 5774  
Telephone

\_\_\_\_\_  
Email Address

License # 49104

Signature of Owner / Contractor: Tommy Patrick / BS. Date: 12/29/22

In filing this application you affirm that you have obtained permission from the above listed license holder  
to use permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or  
use the property for 12 months after completion of the listed work.

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