

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

Owner (s) of Structure JULY POLLARD Phone (919) 820 1775
Owner (s) Mailing Address: 4845 CHURCH ST COVETS

Land Owner Name (s) _____ Phone: _____

Construction or Site Address: _____

PN# _____ Parcel# _____

Job Cost \$7000 Description of Work to be done CHURCH OUT PACKAGE RECOMMENDATION

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 Batts _____ Water Heater _____

Specific Directions to Job from Lillington _____

Subdivision _____ Lot# _____

I Thomas Patrick will provide the Electrical labor on this structure.
(Contractor's Name) (Trade)

I am 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 other applicable State and local laws, ordinances and regulations.

Patrick Electrical Contractors
Contractor's Company Name

910 895 5774

Telephone

1309 N. Main Street, Lillington NC 27546
Address

Email Address

49104
License#

Structure Owner / Contractor Signature Thomas Patrick / BS Date: 01/15/23

By signing 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 sell the listed property for 12 months after completion of the listed work.

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

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

Owner (s) of Structure: Dee Pollard Phone: (919) 820-1775
 Owner (s) Mailing Address: 4845 Church St Cochts

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: _____

Parcel #: _____ Parcel #: _____

Job Cost: \$7000 Description of Work to be done: encumbrance / 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 Bais _____ Water Heater _____

Specific Directions to Job from Lillington: _____

Subdivision: _____ Lot #: _____

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

I am the holding owner of 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.

JEM Heat & Air
 Contractor's Company Name
124 Worthington Road, Durham NC 28334
 Address
17164
 License #

910 897 5501
 Telephone
huststone@centurylink.net
 Email Address

Structure Owner / Contractor Signature: Kent Johnson / B.S. Date: 11/5/23

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