

Application # \_\_\_\_\_

### 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: Della Stewart Phone: 910-897-8850

Owner (s) Mailing Address: 106 East C Street  
Erwin

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

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

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

Job Cost (Required): 6308<sup>00</sup> Description of Work to be done Replace Duct Work  
Job replacement. Re-use existing Boots & Grills

Mechanical: New Unit With Ductwork \_\_\_ New Unit Without Ductwork \_\_\_ Gas Piping \_\_\_ Other 6

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 Indoor Comfort Sys will provide the Mech labor on this structure.  
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 17615, 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.

Indoor Comfort Systems LLC  
Contractor's Company Name

910-897-1853  
Telephone

PO Box 307 Coats  
Address

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

17615  
License #

Structure Owner / Contractor Signature: [Signature] Date: 2-8-23

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**

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