Application #_

Certification of Work Performed E (Individual Trade App	
Owner (s) of Structure: RYAN MOORE	Phone: 402.321.8000
Owner (s) Mailing Address: 274 RIVER OAK STREET	
SPRING LAKE, NC 28390	
Land Owner Name (s): SAME AS ABOVE	Phone:
Construction or Site Address:	
PIN # Parcel #	
Job Cost: \$14,988.00 Description of Work to be done CHAN	GE OUT 2 - 2 TON S/S HEAT PUMPS
Mechanical: New Unit With Ductwork New Unit Without [Ouctwork 🗶 Gas Piping Other
Electrical*: 200 Amp <200 Amp Service Change * For Progress Energy customers we need the progress energy customers we need the progress energy customers we need the progress energy customers are needed to be a service of the progress energy customers are needed to be a service of the progress energy customers are needed to be a service of the progress energy customers are needed to be a service of the progress energy customers are needed to be a service of the progress energy customers are needed to be a service of the progress energy customers are needed to be a service of the progress energy customers are needed to be a service of the progress energy customers are needed to be a service of the progress energy customers are needed to be a service of the progress energy customers are needed to be a service of the progress energy customers are needed to be a service of the progress energy customers are needed to be a service of the progress energy customers are needed to be a service of the progress energy customers are needed to be a service of the progress energy customers are needed to be a service of the progress energy customers are needed to be a service of the progress energy customers are needed to be a service of the progress energy customers are needed to be a service of the progress energy customers.	_ Service Reconnect Other emise number
Plumbing: Water/Sewer Tap Number of Baths	Water Heater
Specific Directions to Job from Lillington:	
Subdivision:	_Lot #:
I BASS AIR CONDITIONINGwill provide the MECHANIC (Contractors Name)	(Trade)
I am the building owner or my NC state license number is33	
perform such work on the above structure legally. All work shall	
other applicable State and local laws, ordinances and regulation	s.
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 Alis Structure	Date: 3-13-23
By signing this application you affirm that you have obtained per purchase permits on their behalf. If doing the work as owner you the listed property for 12 months after completion of the listed w	understand that you cannot rent, lease or sell

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.harnett.org/permits

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

Application	#

Harnett County Central Permitting
PO Box 65 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: Byen 1700RC Phone: 402-321-8000
Owner (s) Mailing Address: 274 River Oakst.
SAring Lake MC 28:390
Land Owner Name (s): Rygal Moore Phone: 402-321-8000
Construction or Site Address: 274 River Oat St. Stag Lake 28390
PIN # Parcel #
Job Cost (Required):Description of Work to be done Rokook 2404 8KW
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 Baths Water Heater
Specific Directions to Job from Lillington:
Cubdivision.
Subdivision:Lot #:
Dornie Louble, will provide the electrical labor on this structure. (Contractors Name)
Dornie Lowle, will provide the electrical labor on this structure. (Contractors Name) (Trade) I am the building owner or my NC state license number is 6/36-44, which entitles me to
I Donnie Louble, will provide the electrical labor on this structure. (Contractors Name) I am the building owner or my NC state license number is 6/36-44, which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all
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I am the building owner or my NC state license number is 6/36-44, 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. All man Electric Coul 9/0-485-86/15 Contractor's Company Name Telephone Telephone
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Donnie Louble, will provide the

*Company name, address, & phone must match information on license Faxed or Mailed application could have an approximately 1-5 day process time

the listed property for 12 months after completion of the listed work.