

**Harnett County Central Permitting**  
 PO Box 65 Lillington, NC 27546 - Fax 910-893-7525 - Fax 910-893-2736 - www.harnett.org/permits  
**Certification of Work Performed By Owner/Contractor**  
 (Individual Trade Application)

Owner (s) of Structure: CNN3 Keefer Phone: (910) 705-6301  
 Owner (s) Mailing Address: 2420 NC HWY 55 W. COATS

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

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

PAR# \_\_\_\_\_ Parcel# \_\_\_\_\_

Job Cost: \$ 10,000 Description of Work to be done: change out package GAS TO package heat pump

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 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 existing 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.

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

910 897 5501  
 Telephone  
huststone@centurylink.net  
 Email Address

Structure Owner / Contractor Signature: Kent Johnson JS Date: 04/15/23

By signing this application you affirm that you have obtained permission from the above listed license holder to perform these 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

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

Owner (s) of Structure Chnskeel Phone (910) 705 0301  
Owner (s) Mailing Address: 2420 NC HWY 55 W COATS

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

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

PI# \_\_\_\_\_ Parcel# \_\_\_\_\_

Job Cost \$200 Description of Work to be done change out packer unit and reconnection

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 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 holding 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  
1309 N. Main Street, Lillington AL 2834  
Address  
49104  
License#

910 895 5774  
Telephone  
\_\_\_\_\_  
Email Address

Structure Owner / Contractor Signature Thomas Patrick / BS Date: 04/15/23

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