

JOB# 73518241

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

**Harnett County Central Permitting**

PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.harnett.org/permits  
Certification of Work Performed By Owner/Contractor  
(Individual Trade Application)

Owner (s) of Structure: LORTHY WILSON Phone: 910.964.3913

Owner (s) Mailing Address: 488 STONE CROSS DIRVE  
SPRING LAKE, NC 28390

Land Owner Name (s): SAME AS ABOVE Phone: \_\_\_\_\_

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

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

Job Cost: \$9,500.00 Description of Work to be done CHANGE OUT 2 TON S/S HEAT PUMP

Mechanical: New Unit With Ductwork \_\_\_ New Unit Without Ductwork X 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:  
\_\_\_\_\_  
\_\_\_\_\_

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

I BASS AIR CONDITIONING will provide the MECHANICAL labor on this structure.  
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 33586, 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.

BASS AIR CONDITIONING COMPANY, INC

910-424-3570

Contractor's Company Name

Telephone

3261 NATAL STREET, FAYETTEVILLE NC 28306

STACY@BASS-AIR.COM

Address

Email Address

33586

License # \_\_\_\_\_

Structure Owner / Contractor Signature: *Calvin Bass* Date: 4/18/23

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

ELECTRICAL BY: ALLMAN ELECTRIC 6136-U

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

### Harnett County Central Permitting

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

Owner (s) of Structure: Lorthy Wilson Phone: 910-964-3913

Owner (s) Mailing Address: 488 Stone Cross Dr.  
Spring Lake, NC 28390

Land Owner Name (s): SAME Phone: Same

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

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

Job Cost (Required): \_\_\_\_\_ Description of Work to be done Reconnect 2 tone SKW SWH.  
Bas 4/AIR.

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:  
\_\_\_\_\_  
\_\_\_\_\_

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

I Donnie Louche will provide the electrical labor on this structure.  
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 6136-11, 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.

Allman Electric Corp  
Contractor's Company Name

910-485-8617  
Telephone  
permits@allmanelectric.com  
Email Address

345 Wilkes Rd Fayetteville NC 28306  
Address

6136-11  
License #

Structure Owner / Contractor Signature: Donnie Louche Date: 4-18-23

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