

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: WINSTON GROUP LLC Phone: 919 262 9113

Owner (s) Mailing Address: 51 BUTLER COMMONS DR.
LILLINGTON 27546

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: 91 WINSTON DR. LILLINGTON

PIN # _____ Parcel # _____

Job Cost: _____ Description of Work to be done CP AIR HANDLER ONLY

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: CAMPBELL PONTE Lot #: _____

I Larry Parker / ROBBIE FARNER will provide the Mechanical / ELECTRICAL labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 20012 / 17363, 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.

Certified Heating & Air, Inc / FARNERS ELECTRIC 910-858-0000
Contractor's Company Name Telephone
PO Box 1071 Hope Mills, NC 28348 ehrin.certified@gmail.com
Address Email Address
20012
License #

Structure Owner / Contractor Signature:  Date: 4.25.23

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