

### 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: Timothy Smith Phone: (919) 586-1819

Owner (s) Mailing Address: 481 Lafayette Rd  
FV NC 27526

Land Owner Name (s): Timothy Smith Phone: (919) 586-1819

Construction or Site Address: 481 Lafayette Rd FV NC 27526

PIN # 0653-65-5213.000 Parcel # 080653-000

Job Cost (Required): \$6,672.<sup>49</sup> Description of Work to be done Replacement of  
HP + AH

Mechanical: New Unit With Ductwork  New Unit Without Ductwork  Gas Piping  Other  **HP AH**

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: BETTY S IVERY Lot #: 2

I PATRICK KEENAN will provide the MECHANICAL labor on this structure.  
(Contractors Name) (Trade)

I am the building owner or my NC state license number is L032872, 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.

YELLOW DOT HEATING + AIR LLC 919-622-4172  
Contractor's Company Name Telephone  
2400 Sumner Blvd Raleigh NC 27616 llopez@ydhvac.com  
Address Email Address  
L032872

License # \_\_\_\_\_  
Structure Owner / Contractor Signature: Laura Hernandez Lopez Date: 5/23/23

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**

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Certification of Work Performed By Owner/Contractor

(Individual Trade Application)

Owner (s) of Structure: \_\_\_\_\_ Phone: \_\_\_\_\_

Owner (s) Mailing Address: \_\_\_\_\_

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

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

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

Job Cost (Required): \$6,672.<sup>49</sup> Description of Work to be done Electrical Reconnection  
for split HP + AH

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

Electrical\*: 200 Amp \_\_\_ <200 Amp \_\_\_ Service Change \_\_\_ Service Reconnect \_\_\_ Other  Electrical Reconnection

\* 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: BETTY IVEY Lot #: 2

I, DANIEL CART will provide the ELECTRICAL labor on this structure.  
(Contractors Name) (Trade)

I am the building owner or my NC state license number is L-32690, 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.

YELLOW DOT HEATING + AIRUC 919-622-4172  
Contractor's Company Name Telephone  
2400 SUMNER BLVD llopez@ydhvac.com  
Address Email Address  
L-32690  
License #

Structure Owner / Contractor Signature: [Signature] Date: 5/23/23

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**  
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