

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

Owner (s) of Structure: VAMIE SMITH Phone: (910) 621-4002

Owner (s) Mailing Address: 1001 BUCKSKIN LANE ERWIN

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: _____

PIN # _____ Parcel # _____

Job Cost (Required): 5200 Description of Work to be done RECONNECT

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 JUSTIN POPE will provide the _____ labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 27784, 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.

JANE M HUGH
Contractor's Company Name

9108975501
Telephone

724 TURNINGEN RD DUMM
Address

Email Address

PLUM
License #

Structure Owner / Contractor Signature: _____ Date: 09/31/27

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

Owner (s) of Structure: Vernie Smith Phone: 910 424 4002
Owner (s) Mailing Address: 109 Buckskin rd emm
and Owner Name (s): _____ Phone: _____
Construction or Site Address: _____
PIN # _____ Parcel # _____

Job Cost (Required): \$7000 Description of Work to be done change out furnace unit

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 Kent Johnson will provide the Mech labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 17164, 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.

J & M HVAC
Contractor's Company Name
724 Tunington rd emm
Address
17164
License #

910 893 75501
Telephone

Email Address

Structure Owner / Contractor Signature: [Signature] Date: 06/30/23

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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