

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: TUNNINGTON RE Phone: 919 669 8729

Owner (s) Mailing Address: 601 MAIN ST LILLINGTON Apt 303 #5

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: _____

PIN # _____ Parcel # _____

Job Cost (Required): \$10000 Description of Work to be done change out

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 Kurt 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 AND HVAC
Contractor's Company Name

910 897 5501
Telephone

721 Tunnington Rd Lillington
Address

jsammelland@
Email Address

17164
License #

cmrmm

Structure Owner / Contractor Signature: [Signature] Date: 04/23/23

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 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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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: JAN TUNNINGTON RE Phone: 919/669-8729

Owner (s) Mailing Address: 601 MAIN ST LILLINGTON APT #5

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: _____

PIN # _____ Parcel # _____

Job Cost (Required): 200 Description of Work to be done Change out / 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 JASMIN will provide the elec labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 27284, 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.

JASMIN PAUL ELLI
Contractor's Company Name

919/820
Telephone

81 BEAUFORT DR LILLINGTON
Address

Email Address

27284
License #

Structure Owner / Contractor Signature: [Signature] Date: 02/23/23

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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