

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: NADIA McNAIR Phone: 910-808-6962

Owner (s) Mailing Address: 204 WEST D STREET
ERWIN, NC 28339

Land Owner Name (s): NADIA McNAIR Phone: 910-808-6962

Construction or Site Address: 204 WEST D STREET ERWIN, NC 28339

PIN # _____ Parcel # _____

Job Cost (Required): \$12,000.00 Description of Work to be done CHANGE OUT PACKAGED HEAT PUMP OUTSIDE AND DUCTWORK IN CRAWL SPACE

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: GO TOWARD ERWIN ON 421 S/NC27E
TURN RIGHT ONTO NC 217 / N 13th ST.
TURN RIGHT ONTO WEST D ST.

Subdivision: _____ Lot #: _____

I NORMAN'S HEATING AND COOLING LLC will provide the MECHANICAL labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 29498, 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.

NORMAN'S HEATING AND COOLING LLC Telephone 919-410-1866
Contractor's Company Name
1135 BRIDLEMINE DRIVE FURWAY-VARINA, NC Email Address ronaldnorman@live.com
Address 29498 27526
License # _____

Structure Owner / Contractor Signature: [Signature] Date: 29 AUGUST 2023

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: Nadia McNaair Phone: 910 208 6962

Owner (s) Mailing Address: 204 W D St. Erwin, NC

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: 204 W D St. Erwin, NC

PIN # _____ Parcel # _____

Job Cost (Required): \$500.00 Description of Work to be done: reconnect to heat pump packaged 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 Black Roberson will provide the Electrical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 8900L, 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.

Black E Roberson 252 795 3603
Contractor's Company Name Telephone
1715 Black rd Robersonville, NC 27871 patblack@centurylink.net
Address Email Address
8900L
License #

Structure Owner / Contractor Signature: Kenny Roberson Date: 8/29/23

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.

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