FAX COVER SHEET



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Address: 1139 Robeson St. Fayetteville NC Phone: (910) 483-8790 / Fax: (910) 483-873 Email: Info@CapeFearAir.com Web: www.CapeFearAir.com	7
To: Harne H County Central Permitting company name: Inspections / Permitting	DATE: FAX#: 910-893-2793
FROM: Kristin * juala@ capefeara ***********************************	# of pages: (Including Cover) ***********************************
NOTES: Please See the following Please charge the following	cation for processing credit card:
Name: Dave Burks Visa	# 4053013300607273

Application #	
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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: 1m Ruff Phone: 919 - 961 - 0743
Owner (s) Mailing Address: 45 Edge.combe Dr
Spring Lake NC 28390
Land Owner Name (s):
Construction or Site Address: 45 Edge Combe DY Spring Lake NC 28390
PIN # Parcel #
Job Cost (Required): \$11,371 Description of Work to be done HMC Changer to 3.5 ton split heat pump System including released report Mechanical: New Unit With Ductwork New Unit Without Ductwork \(\) Gas Piping Other
Electrical*: 200 Amp <200 Amp Service Change Service Reconnect Other X VO CO K * 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 <u>Jeverny Johnson</u> will provide the <u>HVAC + Electrical</u> labor on this structure. (Contractors Name) (Trade) I am the building owner or my NC state license number is 30052 H2 [31418, 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.
Cape Few Alc + Heating / Cape Few Electrical Sences 910-483-8790 Telephone 1139 Robeson St Fayeten 11e NC 28305 Address 30052 H2 / 31418 L License #
Structure Owner / Contractor Signature: To my tom SON Date: 1127/23

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