Ap	plication	ŧ	

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)

Downer (s) Mailing Address: 55 Farrah - Shear Way Anger NV 27501 Phone: Phone:	Owner (s) of	Structure: Kob Dixon Phone:
Address Construction or Site Address:		
Land Owner Name (s):	• (e)	
PIN #	Land Owner I	
Dob Cost (Required): 1381 Description of Work to be done	Construction	or Site Address:
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 #: Contractors Name Lot #: Tarde Labor on this structure. (Trade) I am the building owner or my NC state license number is Am the building owner or my NC state license number is I am the building owner or my NC state license number is I am the building owner or my NC state license number is I am the building owner or my NC state license number is I am the building owner or my NC state license number is I am the building owner or my NC state license number is I am the building owner or my NC state license number is I am the building owner or my NC state license number is I am the building owner or my NC state license number is I am the building owner or my NC state license number is I am the building owner or my NC state license number is I am the building owner or my NC state license number is I am the building owner or my NC state license number is I am the building owner or my NC state license number is I am the building owner or my NC state license number is I am the building owner or my NC state license number is I am the building owner or my NC state license number is	PIN#	Parcel #
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: Lot #: Your Cust will provide the Electrical labor on this structure. (Contractors Name) I am the building owner or my NC state license number is 32452 I am the provide the Electrical 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. Yes Electrical Telephone Kinguntagair 1897 Company Name	Job Cost (Re	equired: 1381 Description of Work to be done Hac, Changeaut 270N HP SPIH
*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 #: labor on this structure. (Contractors Name)	Mechanical:	New Unit With Ductwork New Unit Without Ductwork \(\frac{\frac{1}{2}}{2} \) Gas Piping Other
Subdivision: Lot #: Nance Gust	Electrical*:	200 Amp <200 Amp Service Change Service Reconnect Other * For Progress Energy customers we need the premise number
Subdivision: Lot #: Nance, Gust will provide the State Contractor's Name (Trade) I am the building owner or my NC state license number is 32452 , 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. NG Flactical (Trade) (Trade) (Trade) Telephone (Trade) (Tr	Plumbing:	Water/Sewer Tap Number of Baths Water Heater
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Yarra Gust will provide the Sectro labor on this structure. (Trade) I am the building owner or my NC state license number is 32452 , 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. VKG Elactrical		
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I am the building owner or my NC state license number is 32452, 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. VKG Electrical Contractor's Company Name Address Address License #	Subdivision:	LOT #:
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. VKG Flactnca D Contractor's Company Name Address Address License #	1 Yance (Cor	ntractors Name) Will provide the State license number is 32457 which entitles me to
other applicable State and local laws, ordinances and regulations. VKG Electrical Contractor's Company Name OHOL Results Dr., Scurford 27337 Address BOHSD License #		
VKG Electrical Contractor's Company Name Address B2452 License # O19-356-2225 Telephone Kinghtgair1897 Ogm Email Address 1132123		
Address Baysa License # Licens	other applica	ble State and local laws, ordinances and regulations.
Address Email Address J License #	VKG E Contractor's	Company Name 919-356-2225 Telephone
32452 License #	10401	
1 1 1 2 1 23	Address	Email Address J
1 1 1 2 1 23	02458	
Structure Owner / Contractor Signature: Vance & Lund Date: 11/30/23	License #	
Charles a title i a attendant atfilminiat	Structure Ow	ner / Contractor Signature: Nance Sust Date: 11/30/23
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	By eigning this s	profication, you affirm that you have obtained permission from the above listed license holder to purchase permits on their

*Company name, address, & phone must match information on license

listed work.

Faxed or Mailed application could have an approximately 1-5 day process time

Application :	<u> </u>	

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wner (s) of Structure: Robin Dixon Phone: 919-961-0799
wner (s) Mailing Address: 55 Farrah - Shea Way
Angier NG 27501
nd Owner Name (s):Phone:
onstruction or Site Address:
N # Parcel #
b Cost (Required): 1381 Description of Work to be done HVAC Changeaut 2 TOO UP SPILE
echanical: New Unit With Ductwork New Unit Without Ductwork X Gas Piping Other
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Contractors Name) will provide the McChanical labor on this structure. (Trade) am the building owner or my NC state license number is 28280, which entitles me to
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her applicable State and local laws, ordinances and regulations.
ing Heatings & Air ontractor's Company Name Telephone Xinghtgair 1895-3600 Email Address Email Address
tructure Owner / Contractor Signature: Roy & Mull Date: 11/30/23
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