	Application #_				
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Harnett County Central Permitting
PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.harnett.org/permits Certification of Work Performed By Owner/Contractor (Individual Trade Application)

Owner (s) of Structure: Goodon Haire Phone: 910-890-9429 Owner (s) Mailing Address: 354 Taylor Rd Spring Lake, NC 28390
Land Owner Name (s): Chordon Haire Phone: 910 - 890 - 9429  Construction or Site Address: 4548 Nursery ha Spring Lake, NC 28390  PIN#
Job Cost: 18, 285.00 Description of Work to be done Unange out of a 3 ton gas package unit. Connected to existing duct work + existing electrical.
Mechanical: New Unit With Ductwork New Unit Without Ductwork 🛨 Gas Piping Other
Electrical*: 200 Amp <200 Amp Service Change Service Reconnect Other Connected to *For Progress Energy customers we need the premise number **Call
Plumbing: Water/Sewer Tap Number of Baths Water Heater
Specific Directions to Job from Lillington:
Subdivision:Lot #:
(Contractors Name) will provide the HIAC Electrical labor on this structure.
I am the building owner or my NC state license number is 17439 H2-H3 2743, 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.
Foust Heating + Air Conditioning Inc Contractor's Company Name  2974 Dung Ad Eastover NC 28312  Knotoustair um
Address Email Address License #
Structure Owner / Contractor Signature: Milhoel CFourt Date: 1215123
By signing this application you affirm that you have obtained permission from the above listed license holder to

the listed property for 12 months after completion of the listed work.

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

purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or sell