Application #	

Harnett County Central Permitting
420 McKinney Pkwy / PO Box 65 Lillington, NC 27546 – centralpermitting@harnett.org
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 Structur	e: Dennis	Mullen		Phone:	336-932-	5344		
Owner (s) Mailing Address:		Sandburg Pl.		and the State of		the bridgers of		
Section to the first state of the	Lillin	Lillington NC 27546						
Land Owner Name (Phone:						
Construction or Site	Address:			A CONTRACTOR OF THE PARTY OF TH				
PIN #								
Job Cost (Required): <u>\$8186.00</u> D	escription of V	Work to be done	HVAC chan	geout / 2.5	ton HP split / Atti		
Mechanical: New U	Jnit With Duct	work Ne	w Unit Without D	uctwork _x_	Gas Piping ₋	Other		
			vice Change we need the pre			Other		
Plumbing: Wat	er/Sewer Tap	Num	nber of Baths	Water H	eater			
Specific Directions to	o Job from Lill	inaton:						
Care a	Constant F					Company of the second		
Company Service (200 per la	And the second							
Subdivision:				Lot#:				
Acceptant and acceptant		war and seed seed and an experience and						
Roy F Mills III	wil	II provide the	Mechanical	Angelia Stationa de	abor on this	structure.		
(Contractor	s Name)			(Trade)				
I am the building ow								
perform such work o					ne State Bui	lding Code and all		
other applicable Stat	e and local la	ws, ordinance	es and regulation					
King Heating & Air Conditioning				919	919-895-3600			
Contractor's Company Name 232 Wilson Rd., Sanford NC 27332				Telephone kinghtgair1895@gmail.com				
Address 28280				Ema	il Address			
License #		7	, e	1:		1/24/2024		
Structure Owner / Co	and the state of t		on I	MISS	Date:_			
By signing this applic purchase permits on the listed property for	their behalf, I	If doing the wo	ork as owner you	understand tr	he above lis nat you canr	ted license holder not rent, lease or s		

*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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Owner (s) of Structure:	ennis Mullen	Phone: 336-932-5344				
Owner (s) Mailing Address:_	48 Sandburg Pl.					
	Lillington NC 27546					
Land Owner Name (s):		Phone:				
Construction or Site Address						
		el#				
Job Cost (Required): \$818	6.00Description of Work	o be doneHVAC changeout / 2.5 ton HP split / Attic				
Mechanical: New Unit With	n Ductwork New Uni	t Without Ductwork _X 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 fro	om Lillington:					
Subdivision:		Lot #:				
Vance Gust	will provide theEle	ctrical labor on this structure.				
I am the building owner or my NC state license number is 32452, which entitles me to						
		work shall comply with the State Building Code and all				
other applicable State and local laws, ordinances and regulations. VRG Electrical		919-326-2225				
Contractor's Company Name 6401 Reeves Dr., Sanford NC 27332		Telephone kinghtgair1895@gmail.com				
Address 32452		Email Address				
License #						
Structure Owner / Contracto	r Signature: <u>Varce</u>	Hest Date: 1/24/2024				

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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