

Certification of Work Performed By Owner/Contractor (Individual Trade Application)

Owner (s) of Structure: Brenda & Pat Agnew Phone (540) 419-6037
Owner (s) Mailing Address: 154 STEVENSON MASON RD DR. DUNN

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: _____

PIN # _____ Parcel # _____

Job Cost: \$6000 Description of Work to be done change out reconnection

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 Kent Johnson will provide the MECH. labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 17164, 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.

J&H HVAC
Contractor's Company Name
724 Tunington Rd
Address
17164
License #

(910) 897 5501
Telephone
jasminewald@centurymk
Email Address

Structure Owner / Contractor Signature: [Signature] Date: 4/2/24

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**

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: Brenda Agnew Phone: (540) 419 6037

Owner (s) Mailing Address: 154 Stewart Mason Dr. Dumfries

Land Owner Name (s): _____ Phone: 5404196037

Construction or Site Address: _____

PIN # _____ Parcel # _____

Job Cost: \$6000 Description of Work to be done change out / reconnect

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 TOMMY PATRICK will provide the elec. labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 49100, 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.

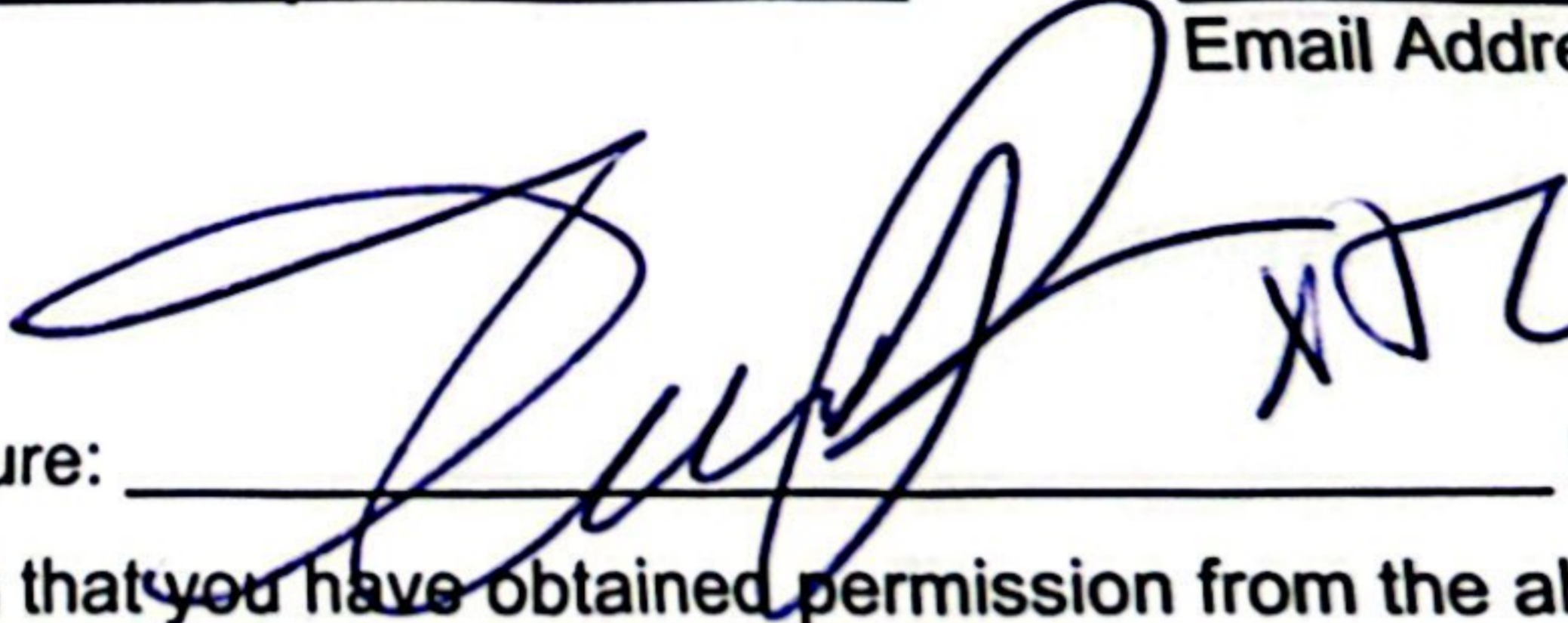
J & H HVAC Patrick Elec.

540 419 6037
Telephone

309 N. Main Lillington
Address

Email Address

49100
License #

 Date: 04/10/18

Structure Owner / Contractor Signature: _____ Date: _____

By signing this application you affirm that you have obtained permission from the above listed license holder purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or s the listed property for 12 months after completion of the listed work.

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