Application #	
PULLING HUND OF	

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.hamett.org/permits Certification of Work Performed By Owner/Contractor (Individual Trade Application)

Owner (s) of Structure:	Chris Jimenez	Phone: 760-646-4283
	ss: 114 Creesthaven Dr.	
	Sanford NC 27332	
Land Owner Name (s):		Phone:
	ress:	
Job Cost (Required): 5	Description of Work to be do	one (2) HVAC changeouts / 2.5 & 1.5 ton
Mechanical: New Unit	With Ductwork New Unit Witho	ut Ductwork X Gas Piping Other
	<200 Amp Service Change ress Energy customers we need the	Service Reconnect Other
Plumbing: Water/S	ewer Tap Number of Baths	Water Heater
Specific Directions to Jol	from Lillington:	
Subdivision:		Lot #:
		cotw.
Duncan Edward Jag	gers will provide the Electrical	labor on this structure
(Contractors Na	me)	labor on this structure.
I am the building owner	or my NC state license number is	21207 , which entitles me to
		shall comply with the State Building Code and all
other applicable State ar	nd local laws, ordinances and regula	itions,
King Heating & Air Cor	ndittioning	919-895-3600
Contractor's Company N 232 Wilson Rd., Sanfo		Telephone kinghtgair1895@gmail.com
Address 21207		Email Address
License #		
Structure Owner / Contra	actor Signature: Lucan	E Dacars Date: 4/17/24
By signing this application purchase permits on the	on you affirm that you have obtained	permission from the above listed license holder

\*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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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: Ch	ris Jimenez	Phone:760-646-4283
Owner (s) Mailing Address:_		1 42 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
	Sanford NC 27332	
Land Owner Name (s):		Phone:
Construction or Site Address	S	
PIN #	Parcel #	
Job Cost (Required): \$15,6	Description of Work to be o	done (2) HVAC changeouts / 2.5 & 1.5 ton
Mechanical: New Unit With	n Ductwork New Unit With	out Ductwork X Gas Piping Other
	<200 Amp Service Change s Energy customers we need th	e Service Reconnect Other e premise number
Plumbing: Water/Sewe	er Tap Number of Bath	s Water Heater
Specific Directions to Job fro	om Lillington:	
Subdivision:		Lot #:
Oubulvision.		
Roy F Mills III	will provide the Mechani	labor on this structure.
(Contractors Name		(Trade)
I am the building owner or m	y NC state license number is _	28280 , which entitles me to
perform such work on the ab	ove structure legally. All work	shall comply with the State Building Code and a
other applicable State and lo	ocal laws, ordinances and regula	ations.
King Heating & Air Conditt	ioning	919-895-3600
Contractor's Company Name 232 Wilson Rd., Sanford I		Telephone kinghtgair1895@gmail.com
Address 28280		Email Address
License #	$\bigcirc$ $\bigcirc$	<b>^</b> .
Structure Owner / Contractor	Signature: Fon	/ Date: 4/17/24
By signing this application your purchase permits on their be	ou affirm that you have obtained	d permission from the above listed license holder you understand that you cannot rent, lease or

\*Company name, address, & phone must match information on license Faxed or Mailed application could have an approximately 1-5 day process time