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Application	TT	

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 Stru	ucture: <i>Glei</i>	n & Jennife	r Carring	ton	_Phone:_ <i>_9</i>	19-322	2-7364
Owner (s) Mailin	a Address:	88 Stone	ev Hill 2	ane			
		Danford	NC 273	332			
Land Owner Nar	me (s):	5	ane		Phone:		
Construction or S							
PIN #			Parcel # _			***	
Job Cost (Requ 	ired): <u>7600</u> R 2   Mea	Description	of Work to be c	done <i>Cha</i>	ange ou	t of 2	2.5 TON
Mechanical: N	ew Unit With I	Ductwork	New Unit With	out Ductwo	rk Ga	s Piping	_ Other
Electrical*: 20	00 Amp < For Progress	200 Amp \$ Energy custom	Service Change ers we need th	e Serv le premise	ice Reconr number	nect O	ther <u>charge</u> au
Plumbing:	Water/Sewer	Tap N	lumber of Bath	s\	Water Heat	er	
Specific Direction							
			4400				
Subdivision:	NA			Lot #	:_ N/	4	
1 <u>Center Hear</u> (Contra							
I am the building	owner or my	NC state licen	se number is _	4627	<b>7</b> , \	which entitl	es me to
perform such wo	ork on the abo	ve structure le	gally. All work	shall comp	ly with the	State Build	ing Code and all
other applicable	State and loc	al laws, ordina	nces and regula	ations.			
CENTER M. Contractor's Cor		A AIR CON	DITIONING	5 CO	Telepho	<i>775 -2</i>	
		T SANFOR	20 NC 27	332	agme	secen	terheat com
511 E. M4 Address 4627 License #	1 Electric	ol # 17	001		Email A		
Structure Owner	· / Contractor	Signature:	Marie	M. LE	m	Date:	4/19/24
By signing this a	ippiication you	ı anırm that yol	Phave obtained	a permissio	n nom me		d license holder to t rent, lease or sell

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

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