Application	on #		
Application	OII #F		

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 Structure: Justin Waller	Phone:(925) 699-2139
Owner (s) Mailing Address: 37 Abigail Way	
Cameron NC 28326	
Land Owner Name (s):	Phone:
Construction or Site Address:	
PIN#Parcel#	
Job Cost (Required): \$6618 Description of Work to b	
	Attic
Mechanical: New Unit With Ductwork New Unit W	/ithout Ductwork X Gas Piping Other
Electrical*: 200 Amp <200 Amp Service Cha	nge Service Reconnect Other
* For Progress Energy customers we need	d the premise number
Plumbing: Water/Sewer Tap Number of Ba	aths Water Heater
Specific Directions to Job from Lillington:	
Specific Directions to God Notification.	
Subdivision:	Lot #:
Roy F Mills III Mecha	anical Jahan an this atmenture
Roy F Mills III will provide the Mecha (Contractors Name)	(Trade)
I am the building owner or my NC state license number is	
perform such work on the above structure legally. All wo	
other applicable State and local laws, ordinances and re-	
	(919) 895-3600
King Heating & Air Conditioning	Telephone
Contractor's Company Name 232 Wilson Rd., Sanford NC 27332	kinghtgair1895@gmail.com
Address	Email Address
28280	
License #	^
Structure Owner / Contractor Signature:	Date: 5/10/24
By signing this application you affirm that you have obtain	ined permission from the above listed license holder
purchase permits on their behalf. If doing the work as ow the listed property for 12 months after completion of the	vner you understand that you cannot rent, lease or s listed work

*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) Mailing Address: 37 Abigail V	
Cameron N	IC 28326
Land Owner Name (s):	Phone:
Construction or Site Address:	
	Parcel #
****	on of Work to be done HVAC Changeout / 1.5 ton HP split/
Mechanical: New Unit With Ductwork	_ New Unit Without Ductwork X Gas Piping Other
Electrical*: 200 Amp <200 Amp * For Progress Energy custo	_ Service Change Service Reconnect Other omers we need the premise number
Plumbing: Water/Sewer Tap	Number of Baths Water Heater
Specific Directions to Job from Lillington:	
Subdivision:	Lot #:
Duncan Edward Jaggers will provide (Contractors Name)	e the Electrical labor on this structure.
I am the building owner or my NC state lic	ense number is 21207, 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, ordin	nances and regulations.
King Heating & Air Conditioning	(919) 895-3600
Contractor's Company Name	Telephone
232 Wilson Rd., Sanford NC 27332	kinghtgair1895@gmail.com
Address 21207	Email Address
License #	
Structure Owner / Contractor Signature:	Duran & Jaggers Date: 5/10/24
By signing this application you affirm that y purchase permits on their behalf. If doing t the listed property for 12 months after com	ou have obtained permission from the above listed license holder he work as owner you understand that you cannot rent, lease or s

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