

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 Structure: Chenoa Leavell Phone: \_\_\_\_\_

Owner (s) Mailing Address: 445 Hayden Ln Cameron NC, 28326

Land Owner Name (s): \_\_\_\_\_ Phone: \_\_\_\_\_

Construction or Site Address: \_\_\_\_\_

PIN # \_\_\_\_\_ Parcel # \_\_\_\_\_

Job Cost (Required): 10,583.00 Description of Work to be done we will be installing a 3.5 ton split heat pump system to existing ductwork & Electrical.

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 Chandler Sikes will provide the Mechanical labor on this structure.  
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 11972, 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.

All Seasons A/C & Heating  
Contractor's Company Name  
3981 Cumberland Rd  
Address  
11972  
License #

910.868.6206  
Telephone  
All Seasons@NC.rr.com  
Email Address

Structure Owner / Contractor Signature: Chandler Sikes Date: 4.30.24

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**

**Faxed or Mailed application could have an approximately 1-5 day process time**

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(Individual Trade Application)**

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Owner (s) Mailing Address: 445 Hayden Ln Cameron, NC, 28326

Land Owner Name (s): \_\_\_\_\_ Phone: \_\_\_\_\_

Construction or Site Address: \_\_\_\_\_

PIN # \_\_\_\_\_ Parcel # \_\_\_\_\_

Job Cost (Required): \_\_\_\_\_ Description of Work to be done Reconnect  
HVAC

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 George Baker will provide the Electrical labor on this structure.  
(Contractors Name) (Trade)

I am the building owner or my NC state license number is L-17758, 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.

All Seasons A/c & Heating  
Contractor's Company Name  
39901 Cumberland Rd Fayetteville  
Address NC 28306  
L-17758  
License #

910 868 6206  
Telephone  
Allseasons@NC.nc.com  
Email Address

Structure Owner / Contractor Signature: George Baker Date: 4/30/24

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

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