

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: Open Door Phone: _____

Owner (s) Mailing Address: 1275 8th Street, Arcata, CA 95521

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: 35 Rocky Point Ct. Fuquay-Varina

PIN # _____ Parcel # _____

Job Cost (Required): _____ Description of Work to be done: HVAC change-out
Heat pump system, High + low voltage reconnects

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 Wayne Clemmons will provide the Electrical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 11055, 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.

Comfort Shield HVAC of NC
Contractor's Company Name
937 N Brightleaf Blvd, Smithfield NC
Address
11055
License #

919-588-8015
Telephone
jamie@comfortshieldhvacofnc.com
Email Address

Structure Owner / Contractor Signature: Wayne Clemmons Date: 1/18/24

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

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: Open Door Phone: _____
Owner (s) Mailing Address: 1275 8th Street, Arcata, CA 95521

Land Owner Name (s): _____ Phone: _____
Construction or Site Address: 35 Rocky Point Ct. Fuquay-Varina
PIN # _____ Parcel # _____

Job Cost (Required): 5500 Description of Work to be done: 2 ton HVAC changeout
Heat pump system

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 TJ Jessoms will provide the Mechanical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 32187, 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.

Comfort Shield HVAC of NC
Contractor's Company Name
937 N Brightleaf Blvd Smithfield NC
Address 27577
32187
License #

919-588-8015
Telephone
jamich@comfortshieldhvacofnc.com
Email Address

Structure Owner / Contractor Signature: TJ Jessoms Date: 10/18/24

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