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: La	guanda Whitehead	Phone:	919-815-5300
Owner (s) Mailing Address:	107 Cresthaven Dr.		
Owner (5) Mailing Address.	Sanford NC 27332		
Land Ouman Nama (a)		Dhone:	
	ss:	and the second s	
PIN #	Parcel	#	
Job Cost (Required): \$17	412 Description of Work to	he done HVAC Chang	geout (2) 2 & 3 ton HP split
oob oost (required).	Description of Work to	Attic & Craw	
Mechanical: New Unit Wi	ith Ductwork New Unit V	Vithout Ductwork X	Gas Piping Other
	_<200 Amp Service Cha ss Energy customers we nee		onnect Other
Plumbing: Water/Sev	ver Tap Number of E	Baths Water H	eater
Specific Directions to Job f	rom Lillington:		
			The second of th
Subdivision:		Lot #:	
Duncan Edward Jagger	s will provide the Electr	ical	abor on this structure.
(Contractors Nam		(Trade)	
	my NC state license number		
perform such work on the	above structure legally. All w	ork shall comply with the	ne State Building Code and all
other applicable State and	local laws, ordinances and re	egulations.	
King Heating & Air Cond	itioning	919	9-895-3600
Contractor's Company Nar		Tele	phone
232 Wilson Rd., Sanford	NC 27332	king	htgair1895@gmail.com
Address		Ema	il Address
21207			
License #		1a	
Structure Owner / Contract	tor Signature: Luncan	E Jaggers	Date: 7/1/2024
By signing this application	you affirm that you have obta	ained permission from	he above listed license holder t
purchase permits on their to the listed property for 12 m	behalf. If doing the work as o conths after completion of the	wner you understand to listed work	nat you cannot rent, lease or se

*Company name, address, & phone must match information on license

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

Application	#		

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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: Lac	quanda Whitehead	Phone:	919-815-5300		
Owner (s) Mailing Address:_	107 Cresthaven Dr.				
	0 1 1110 07000				
Land Owner Name (s):		Phone:_	Phone:		
AND	3:				
PIN#	Parcel # _				
	12 Description of Work to be				
	XIII .				
Mechanical: New Unit With	n Ductwork New Unit With	out Ductwork X G	Gas Piping Other		
	<200 Amp Service Chang s Energy customers we need the		onnect Other		
Plumbing: Water/Sewe	er Tap Number of Bath	s Water He	eater		
Specific Directions to Job fro	om Lillington:				
			and the same of th		
Subdivision:		Lot #:			
Roy F Mills III	will provide theMechanic	al la	abor on this structure.		
I am the building owner or m	ny NC state license number is _	28280	, which entitles me to		
perform such work on the ab	pove structure legally. All work	shall comply with the	e State Building Code and all		
other applicable State and Id	ocal laws, ordinances and regul	ations.			
King Heating & Air Conditi	ioning	919	-895-3600		
Contractor's Company Name		Telep			
232 Wilson Rd., Sanford I	NC 27332		ntgair1895@gmail.com		
Address • 28280		Email	Address		
License #		1) 1			
Structure Owner / Contracto	r Signature:	1/1/14	Date:7/1/2024		
By signing this application your purchase permits on their be	ou affirm that you have obtained	d permission from the ryou understand the	ne above listed license holder at you cannot rent, lease or so		

*Company name, address, & phone must match information on license

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

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