Application #	
Application #_	

Harnett County Central Permitting Mailing Address - PO Box 65 Lillington, NC 27546 - Physical Address - 420 McKinney PKWY Lillington NC 27546

Ph.: 910-893-7525 - Fax: 910-893-2793 - www.harnett.org/permits Certification of Work Performed By Owner/Contractor (Individual Trade Application) Golden Real Phone: 804-921-9122 Owner (s) of Structure: Owner (s) Mailing Address: Land Owner Name (s): Construction or Site Address: 437 PIN# 0805 Parcel # LOCKBOX Job Cost (Required): 6400 Description of Work to be done 2nd Floor HVAC Keplacement New Unit Without Ductwork

✓ Gas Piping Other Mechanical: New Unit With Ductwork Electrical*: 200 Amp ___ <200 Amp ___ Service Change ___ Service Reconnect \(\sqrt{Other} \) * For Progress Energy customers we need the premise number Plumbing: Water/Sewer Tap ____ Number of Baths ____ Water Heater Specific Directions to Job from Lillington: Replace Air Handler in sciplace outside Heat Purh

Ryan Will (Contractor	will provide thes Name)	HVAC (Trade)	_ labor on this structure.	David Young
I am the building ow	ner or my NC state license num	ber is 36435	which entitles me to	3109 Southall Rd
other applicable Sta	on the above structure legally. A	nd regulations.	i the State Building Code a	Lic# 15740
Mintone 4	onting + cooling		757-315-1154	Muldash

Lot #:

Contractor's Company Name

Telephone

gmail.co

(lac): 1

Structure Owner / Contractor Signature:

Subdivision:

License #

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