

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: Jose Colon Phone: 270-484-8986

Owner (s) Mailing Address: 360 Strike Eagle Dr.
Broadway NC 27505

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: _____

PIN # _____ Parcel # _____

Job Cost (Required): 13829.00 Description of Work to be done HVAC changeout / 2.5 ton hp split
& Zone system / Attic

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 Duncan Edward Jagers will provide the Electrical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license 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, ordinances and regulations.

King Heating & Air Conditioning
Contractor's Company Name
232 Wilson Rd., Sanford NC 27332
Address
21207
License # _____

919-895-3600
Telephone
kinghtgair1895@gmail.com
Email Address

Structure Owner / Contractor Signature: Duncan E. Jagers Date: 1/30/2025

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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Specific Directions to Job from Lillington:

Subdivision: _____ Lot #: _____

I Roy F Mills III will provide the Mechanical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 28280, 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.

King Heating & Air Conditioning
Contractor's Company Name
232 Wilson Rd., Sanford NC 27332
Address
28280
License # _____

919-895-3600
Telephone
kinghtgair1895@gmail.com
Email Address

Structure Owner / Contractor Signature: Roy F Mills Date: 1/30/2025

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