



CentralPermitting@Harnett.org
(910) 893-7525 ext:1
420 McKinney Pkwy (physical)
PO Box 65 (mailing)
Lillington, NC 27546

INDIVIDUAL TRADE APPLICATION

CONSTRUCTION TYPE (circle one): Residential Non-Residential

SITE ADDRESS: 37 HALLOW OAK STREET, SPRING LAKE, NC PIN: _____

LANDOWNER: KADEN & SHEILA SECREST Mailing Address: Same as above

City: _____ State: _____ Zip: _____ Phone: 304.839.8297 Email: _____

JOB COST (required): \$10,802.00

DESCRIPTION OF WORK: CHANGE OUT 3 TON S/S HP

Mechanical: New Unit With Ductwork ☐ New Unit Without Ductwork ☒ Gas Piping ☐ Other _____
Electrical: 200 Amp ☐ Greater than 200 Amp ☐ Service Change ☐ Service Reconnect ☐ Other _____
Plumbing: Water Tap/Sewer Connection ☐ Water Heater ☐ Number of Fixtures _____ Other _____

CONTRACTOR INFORMATION

** Must be owner or licensed contractor. Address, company name & phone must match information on license.*

BASS AIR CONDITIONER COMPANY, INC.

Contractor's Company Name

3261 NATAL STREET, FAYETTEVILLE, NC 28306

Address

33586

License #

910.424.3570

Phone

STACY@BASS-AIR.COM

Email

Mechanical change outs & generator applications require both electrical & mechanical information. If applicable:

ALLMAN ELECTRIC

Contractor's Company Name

345 WILKES ROAD, FAYETTEVILLE, NC 28306

Address

6136-U

License #

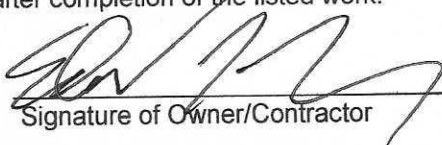
910.485.8617

Phone

KAYE.HANEY@ALLMANELECTRIC.COM

Email

I am the building owner or NC state licensed contractor, which legally entitles me to perform such work on the above structure. I attest that all work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations. **By signing this application, I affirm that I have obtained permission from the above listed license holder to purchase permits on their behalf.** If doing the work as owner, I understand that I cannot rent, lease, or sell the listed property for 12 months after completion of the listed work.


Signature of Owner/Contractor

06.12.25
Date