



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: 146 Abram Ct., Broadway NC 27505 PIN: _____

LANDOWNER: Germaine Madera Mailing Address: _____

City: _____ State: _____ Zip: _____ Phone: 919-857-7654 Email: _____

JOB COST (required): \$15366.00

DESCRIPTION OF WORK: (2) HVAC changeouts/ (2) 1.5 ton HP splits

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.**

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

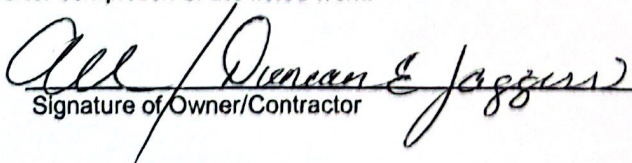
919-895-3600
Phone
kinghtgair1895@gmail.com
Email

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

King Heating & Air / Aaron Lee Underwood
Contractor's Company Name
232 Wilson Rd., Sanford NC 27332
Address
36795
License # _____

919-895-3600
Phone
kinghtgair1895@gmail.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

6/18/2025
Date