



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: 443 HIGHGROVE DRIVE, SPRING LAKE, NO	C 28390 PIN:	
LANDOWNER: JAMES SOUTAR Mailing Address:	443 HIGHGROVE DRIVE	
City:SPRING LAKE State: NC Zip: 28390 Phone: 316.258.8313	Email:	
JOB COST (required): \$14,272.00		
DESCRIPTION OF WORK: CHANGE OUT 4 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 ☐ No.	umber 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.	910.424.3570	
Contractor's Company Name	Phone STACY@BASS-AIR.COM	
3261 NATAL STREET, FAYETTEVILLE, NC 28306 Address	Email	
33586 License #		
	cart & machanical information If applicable:	
Mechanical change outs & generator applications require both electrical & mechanical information. If applicable:		
ALLMAN ELECTRIC	910.485.8617	
Contractor's Company Name	Phone (AYE.HANEY@ALLMANELECTRIC.COM	
343 WILKES RUAD, FATELLEVILLE, NO 2000_	Email	
6136-U		
License #		
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.		
AN 11/1	08.12.25	
Signature of Owner/Contractor	Date	

Application	#
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Harnett County Central Permitting
PO Box 65 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)

Owner (s) of Structure: James Soutar Phone: 316-258-8313		
Owner (s) Mailing Address: 443 Higharove DR		
Spina Lake 28390		
Land Owner Name (s):Phone:		
Construction or Site Address:		
PIN # Parcel #		
Job Cost (Required): Description of Work to be done Robot 4 for 10KW Split (Boss H/A:2)		
Mechanical: New Unit With Ductwork New Unit Without Ductwork Gas PipingOther		
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 #:		
Donnie Louble, will provide the electrical labor on this structure. (Contractors Name) (Trade)		
I am the building owner or my NC state license number is 6/36-U, 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.		
Pollman Electric Coys Contractor's Company Name Telephone Tolephone		
Contractor's Company Name Telephone 345 11): IKU RN Fruitter 1/4 MC 28306 Dermit @ Allmanelectu. C.		
Address Email Address Com License #		
Structure Owner / Contractor Signature: Loud South Date: 8-12-25 -		
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		

*Company name, address, & phone must match information on license Faxed or Mailed application could have an approximately 1-5 day process time

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