



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

INDIVIDUAL TRADE APPLICATION

CONSTRUCTION TYPE: Residential ☒ Non-Residential ☐

SITE ADDRESS: 250 The Inner Circle PIN: _____

LANDOWNER: Joe Smith Mailing Address: 250 The Inner Circle

City: Spring Lake State: NC Zip: 28390 Phone: 910-890-8441 Email: _____

JOB COST (required): 7250.00

DESCRIPTION OF WORK: Remove & install 4 ton split heat pump - change out only

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.

Mechanical
Contractor's Company Name B+M Mechanical, Inc
Address P.O. Box 944 Hope Mills, NC 28348
License # 20781

910-424-5009
Phone
CHARLOTTE 9203@Gmail.com
Email

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

Electrical
Contractor's Company Name Power Source Electrical - Thomas
Address 6227 Swigg Ct. Hope Mills, NC 28348
License # 13791-I

910-308-9926
Phone
power source @nc.rr.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.

Charlotte Honeycutt / Secretary
Signature of Owner/Contractor

10-2-25
Date