	1-7100	21
Application #_	1950044429	

	Harnett County Central Permitting
	PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.harnett.org/permits Certification of Work Performed By Owner/Contractor
	M.1-10 2/1 500 UEST
	Owner (s) Mailing Address: 7 Tarrywile Lake Rd Panbury CT 06810
	Land Owner Name (s): Phone:
	Construction or Site Address: 575 Whispering Pines DR. Spring Lake NC28590
	PIN# 0505-99-9474.000 Parcel# 01053507 0108 20 RA-201
	Job Cost: 4397, 00 Description of Work to be done Replace 1.5 Tow S/S Heg-
	Pung + AIR Hard De
	11210 000000
	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: in Anduson Colek 90/f c/nb
	t., nav
	Subdivision: Lot #:
	Subdivision:Lot #:
	1 _ Bass will provide the _ Mechanical labor on this structure.
1. 1/4	(Contractors Name) will provide the / (Contractors Name) labor on this structure.
1000	Lam the building owner or my NC state license number is (38) which equities me to
111	perform such work on the above structure legally. All work shall comply with the State Building Code and all 1130
M. L.	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.
J. O.	// //// ^ -
10/1	15655 A/C CO TAC 424-3570
T. M. T	Contractor's Company Name 326 Natal St. Fay 10 2830 b DMO @ Dass-air.com
Und.	Address Email Address 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1
UM in	Address 1387 License # Structure Owner / Contractor Signature: All Summers License # Structure Owner / Contractor Signature: All Summers Date: 6-29-18
Ura.	License #
TINTO	5-1-29-18
1,,,	Structure Owner / Contractor Signature: Structure Owner / Contractor
/	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



BUILDING RESIDENTIAL 910-893-7525 www.harnett.org

PERMIT NUMBER CPTS18-50044429

JOB ADDRESS: 575 WHISPERING PINES DR	PERMIT SUBTYPE: STANDALONE TRADE	PARCEL NO: 0505-99-9474.000	
DESCRIPTION: REPLACE 1.5 TON S/S HT PUMP & AIR HANDLER	DATE ISSUED:	DATE EXPIRED:	
PLAN NAME:	ZONING DISTRICT: RA-20R - 0.23 acres (10	00.0%)	
APPLICANT: BASS A/C CO INC 3261 NATAL ST FAYETTEVILLE, NC 28390		PHONE: (910)424-3570 EMAIL:	
CONTRACTOR: BASS AIR CONDITIONING CO INC		PHONE: (910)424-3570	
PO BOX 64249 FAYETTEVILLE, NC 28390	EMAIL:		
OWNER: CAMM MICHAEL M & MARIA P		PHONE:	
575 WHISPERING PINES DRIVE SPRING LAKE, NC 28390		EMAIL:	

REQUIRED INSPECTIONS						
INSPECTION TYPE	APPROVAL	DATE	COMMENTS			

Development Services 108 E. Front St Lillington, NC 27546 910-893-7525

CC SALE

MID: TID: xxx9684 xxxx2853

Ref #:

204966119

Batch #:

1047911

Date/Time:

08/28/18 10:23:52 AM

Inv/Tkt #:

180828102326112

Appr Code:

35151G

Visa

4xxxxxxxxxx2618

Keyed

Amount USD\$ 90.00

Approved

Mode: Card

CUSTOMER COPY