Application	#	

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 (Individual Trade Application)

Owner (s) of Structure: FREDERICK OSCAR ROQUEMORE Phone: 706-691-2423			
Owner (s) Mailing Address: 232 COBBLESTONE DR SPRING LAKE NC 283	90		
Land Owner Name (s): FREDERICK OSCAR ROQUEMORE F			
Construction or Site Address: 232 COBBLESTONE DR SPRING LAKE NC 2	8390		
PIN # 0515-30-5354.000 Parcel # 01053514 0100			
Job Cost: 13802.00 Description of Work to be done REPLAC NG UPF	PER/LOWER HEAT PUMP SYSTEM		
Mechanical: New Unit With Ductwork New Unit Without Ductwork	Gas Piping Other		
Electrical*: 200 Amp Service Change Service * For Progress Energy customers we need the premise no	e Reconnect Other <u>√</u> umber		
Plumbing: Water/Sewer Tap Number of Baths W	ater Heater		
Specific Directions to Job from Lillington:			
			
Subdivision: STONE CROSS SC2 Lot #:	46		
I ARS will provide the MECHANICAL/ELECTRICAL/CONTRACTOR (Contractors Name) (Trade	AL labor on this structure.		
I am the building owner or my NC state license number is 23253/28807	, which entitles me to		
perform such work on the above structure legally. All work shall comply	with the State Building Code and al		
other applicable State and local laws, ordinances and regulations.			
AMERICAN RESIDENTIAL SERVICES LLC	919-861-0883		
Contractor's Company Name	Telephone		
517 PYLON DR RALEIGH NC 27606	8876INSPECTIONS@ARS.COM		
Address	Email Address		
MECH23253/ELEC28807			
License #			
Structure Owner / Contractor Signature:	Date: 5/11/2020		

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