Application	#
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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:	wner (s) of Structure: CINDY BURRELL Phone: 910-343-1653			
Owner (s) Mailing Addre	ess: 169 PINEVALLEY LN	SANFORD NC 27332		
Land Owner Name (s):	CINDY BURRELL	P	hone: 910-343-1653	
Construction or Site Add	dress: 169 PINEVALLEY LI	N SANFORD NC 27332		
PIN # 9587-70-9100.000		Parcel # 03958704 0020	88	
Job Cost: 7806.00 SCUTTLE HOLE	_Description of Work to b	e done_REPLACING SPL	T UPPER HEAT PUMP IN	
Mechanical: New Unit	With Ductwork ✓ Nev	v Unit Without Ductwork	Gas Piping Other	
Electrical*: 200 Amp * For Pro	<200 Amp Serv gress Energy customers	rice Change Service we need the premise nu	e Reconnect Other   mber	
Plumbing: Water/S	Sewer Tap Numl	ber of Baths Wa	ater Heater	
Specific Directions to Jo			<u> </u>	
Subdivision: CRESTVIE	WEST	Lot #: _	23	
ARS (Contractors Na	will provide the $\underline{\mathbb{A}}$	MECHANICAL/ELECTREIC	AL labor on this structure.	
I am the building owner	or my NC state license n	umber is <u>23253/28807</u>	, which entitles me to	
perform such work on th	e above structure legally	. All work shall comply	with the State Building Code and al	
	nd local laws, ordinances			
AMERICAN RESIDENTIA	L SERVICES LLC		919-861-0883	
Contractor's Company Name			Telephone	
517 PYLON DRIVE RALE	IGH NC 27606		8876INSPECTIONS@ARS.COM	
Address	,		Email Address	
MECH23253/ELEC28807				
License #		R2		
Structure Owner / Contr	actor Signature:		Date: 5/18/2020	

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.