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:	MICHELLE CHERBONNEAU	Phone: 910-374-4629
Owner (s) Mailing Addre	ess: 30 MARZY CT SANFORD 27332	
	MICHELLE CHERBONNEAU	Phone: 910-374-4629
Construction or Site Add	dress: 30 MARZY CT SANFORD 27332	
PIN # 9587-41-4372.000		
Job Cost: 8650.00	Description of Work to be done REF	LACE WHOLE HOUSE HEAT PUMP IN CLOSET
Mechanical: New Unit	With Ductwork New Unit Witho	out Ductwork Gas Piping Other
Electrical*: 200 Amp * For Pro	<200 Amp Service Change gress Energy customers we need th	Service Reconnect Other ✓ e premise number
Plumbing: Water/S	Sewer Tap Number of Baths	S Water Heater
Specific Directions to Jo	b from Lillington:	
Subdivision; OVERVIEV	VESTS	Lot #:
l ARS	will provide the MECHANICA	L/ELECTRICAL labor on this structure. (Trade)
I am the building owner	or my NC state license number is $\frac{2}{}$	3253/28807 , which entitles me to
perform such work on th	e above structure legally. All work	shall comply with the State Building Code and al
other applicable State a	nd local laws, ordinances and regula	ations.
AMERICAN RESIDENTIAL SERVICES LLC		919-861-0883
Contractor's Company Name		Telephone
517 PYLON DRIVE RALEIGH NC 27606		8876INSPECTIONS@ARS.COM
Address	-	Email Address
MECH23253/ELEC28807 License #		
Structure Owner / Contr	actor Signature:	Date: 7/14/2020
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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.