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:	104 GOLDLEAF COURT ANGIER NC 27501	Phone: 919-270-5345
Owner (s) Mailing Addre	ess: 104 GOLDLEAF COURT ANGIER NC 2750	01
Land Owner Name (s):	FRANCISCO FAGUNDES	Phone: 919-270-5345
Construction or Site Ad-	dress:	
	Parcel #	
Job Cost: \$16,378 SYSTEM IN ATTIC & CR.	_Description of Work to be done_REPLACING AWL SPACE	G UPPER & LOWER HEAT PUMP
Mechanical: New Unit	t With Ductwork New Unit Without Duc	twork <u>✓</u> Gas Piping Other
	<200 Amp Service Change S gress Energy customers we need the premi	
Plumbing: Water/s	Sewer Tap Number of Baths	Water Heater
Specific Directions to Jo	ob from Lillington:	
Subdivision:	Le	ot #:
ARS	will provide the MECHANICAL/ELEC	TRICAL labor on this structure
ARS will provide the MECHANICAL/ (Contractors Name)		Trade)
I am the building owner	or my NC state license number is 29147/28	807 , which entitles me to
perform such work on the	he above structure legally. All work shall co	mply with the State Building Code and all
other applicable State a	and local laws, ordinances and regulations.	
AMERICAN RESIDENTIAL SERVICES, LLC		919-861-0883
Contractor's Company Name		Telephone
517 PYLON DRIVE RALEIGH NC 27606		8876INSPECTIONS@ARS.COM
Address		Email Address
29147/28807 License #	- 11/2	
Structure Owner / Contr	ractor Signature:	Date: 10/08/2020
By signing this applicati purchase permits on the	ion you affirm that you have obtained permiseir behalf. If doing the work as owner you ur	ssion from the above listed license holder to

the listed property for 12 months after completion of the listed work.

*Company name, address, & phone must match information on license