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: MA	RSHA BELL	Phone: 910-988-2903		
Owner (s) Mailing Address:	65 R E THOMAS	LN ERWIN		
Land Owner Name (s): MA	RSHA BELL	Pho	ne: 910-988-2903	
Construction or Site Addres	s: 65 R E THOMA	AS LN ERWIN		
PIN # 0555-55-5172.000		Parcel # 120555 0085	<u> </u>	
Job Cost: 10468.00 De	scription of Work	k to be done_REPLACING WHOL	E HOUSE HEAT PUMP AND	
,			UV LIGHT IN CLOSET	
Mechanical: New Unit Wit	h Ductwork	New Unit Without Ductwork _	Gas Piping Other	
		Service Change Service F mers we need the premise num		
Plumbing: Water/Sew	er Tap I	Number of Baths Wate	r Heater	
Specific Directions to Job fr	om Lillington:			
Subdivision:		Lot #:		
I ARS(Contractors Name	will provide t	the MECHANICAL/ELECTRICAL (Trade)	labor on this structure.	
I am the building owner or r	ny NC state licer	nse number is 29147/2807	, which entitles me to	
			th the State Building Code and all	
other applicable State and I			, and the second	
AMERICAN RESIDENTAIL SE	ERVCIES LLC	9	19-861-0883	
Contractor's Company Nam	ie	Ţ	elephone	
517 PYLON DRIVE RALEIGH	NC 27606		876INSPECTIONS@ARS.COM	
Address		E	mail Address	
MECH29147/ELEC28807 License #				
LICENSE #		11-		
Structure Owner / Contracto	or Signature:	The	Date: 3/1/2021	
By signing this application y	ou affirm that we	u have obtained nermission fro	m the above listed license holder	

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.