	Application #
Harnett County Central I PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 9 Certification of Work Performed By (Individual Trade Applie	910-893-2793 - www.harnett.org/permits Owner/Contractor
Owner (s) of Structure: DENISE MCCOY	Phone: ⁹¹⁰⁻⁸⁹⁰⁻⁵⁰⁹²
Owner (s) of Structure: DENISE MCCOY Owner (s) Mailing Address: 52 DENISE LN COATS NC 27521	
Land Owner Name (s):	Phone:
Construction or Site Address:	
PIN # Parcel #	
Job Cost: 13,999.00Description of Work to be done REPLACING WHOEL HOUSE 2 TON SPLIT HEAT PUMP SYSTEM AN	
Mechanical: New Unit With Ductwork 🚩 New Unit Without Du	uctwork Gas Piping Other
Electrical*: 200 Amp <200 Amp Service Change * For Progress Energy customers we need the pres	
Plumbing: Water/Sewer Tap Number of Baths	_ Water Heater
Specific Directions to Job from Lillington:	
Subdivision:	Lot #:
ARSwill provide the MECHHANICAL/EL (Contractors Name) I am the building owner or my NC state license number is 16701/L perform such work on the above structure legally. All work shall o	23731-04, which entitles me to comply with the State Building Code and all
other applicable State and local laws, ordinances and regulations	;.
AMERICAN RESIDENTIAL SERVICES LLC (dba) ARS	919-861-0883
Contractor's Company Name	Telephone
641 S NEW HOPE RD RALEIGH NC 27610	8876INSPECTIONS@ARS.COM
Address MECH16701/ELEC23731 License #	Email Address
Structure Owner / Contractor Signature:	Date: 12/3/2024

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