

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: STEVE SWENSON Phone: 401-314-5747

Owner (s) Mailing Address: 58 WALNUT GROVE BUNNLEVEL NC 28323

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: _____

PIN # _____ Parcel # _____

Job Cost: 27,681.00 Description of Work to be done REPLACING 1ST FLOOR HEAT PUMP SYSTEM
LOCATED IN CRAWL AND 2ND FLOOR HEAT PUMP SYSTEM LOCATED IN WALK IN ATTIC.

Mechanical: New Unit With Ductwork New Unit Without Ductwork Gas Piping Other

Electrical*: 200 Amp <200 Amp Service Change Service Reconnect Other

* For Progress Energy customers we need the premise number

Plumbing: Water/Sewer Tap Number of Baths Water Heater

Specific Directions to Job from Lillington:

Subdivision: _____ Lot #: _____

I ARS will provide the MECHANICAL/ELECTRICAL labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 16701/L.23731-04, which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations.

AMERICAN RESIDENTIAL SERVICES LLC

Contractor's Company Name

641 S. NEW HOPE RD RALEIGH NC 27610

Address

MECH16701/LELEC23731


License #

919-861-0883

Telephone

8876INSPECTIONS@ARS.COM

Email Address

Structure Owner / Contractor Signature:  Date: 2/7/2025

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**