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:	LESLIE O'QUINN	Phone: 910-336-4355
Owner (s) Mailing Addr	ress: 4449 WIRE ROAD, LINDEN NC 28356	
Land Owner Name (s):	Idrass: 4449 WIRE ROAD, LINDEN NC 2835	Phone:
FIN#	Talout #	
Job Cost: \$15,769.00 PUMP SYSTEM / LOCAT	_Description of Work to be done REPLAC FED IN CLOSET.	CING WHOLE HOUSE 3 TON SPLIT HEAT
		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 J	ob from Lillington:	
Subdivision:		_Lot #:
I ARS (Contractors N	will provide the MECHANICAL/EL lame) r or my NC state license number is 1670	ECTRICAL labor on this structure. (Trade) 1/L.23731-04 , which entitles me to
		Il comply with the State Building Code and all
	and local laws, ordinances and regulation	
AMERICAN RESIDENTIA	AL SERVICES LLC	919-287-6480
Contractor's Company Name		Telephone
641 S. NEW HOPE RD RALEIGH NC 27610		8876INSPECTIONS@ARS.COM
Address MECH16701/ELECL.237	31-01	Email Address
License #		
	00 10	0
Structure Owner / Cont	tractor Signature: Mother B	Date: 5/12/2025
By signing this applicat	ion you affirm that you have obtained pe	rmission from the above listed license holder to u understand that you cannot rent, lease or sell

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

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