Application # MRESI 807-003 6

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)

leremy (Individual Trade App	,
Owner (s) of Structure: Amanda Weeks	Phone: 803-622-9473
Owner (s) Malling Address: 105 Rolling Dines D	
Spring Lake, No. 28	3370
Land Owner Name (s): Amanda Weeks	Phone: 803-622-9473
Construction or Site Address: 105 Rolling Pines	Dr.
PIN# 0505-98-9529.000 Parcel#	01053509 0100 OT RA-20R
Job Cost: 6900.00 Description of Work to be done HVAC Sput heat puny Sistem	-changeaut of 25 ton
Mechanical: New Unit With Ductwork New Unit Without D	ouctwork 🗹 Gas Piping Other
Electrical*: 200 Amp <200 Amp Service Change * For Progress Energy customers we need the pro-	_ Service Reconnect <a href="#">Y</a> Other <a href="#"></a>
Plumbing: Water/Sewer Tap Number of Baths	Water Heater
Specific Directions to Job from Lillington:	
Subdivision:	_Lot #:
Jeremy Johnson will provide the HVAC & Electrical (Contractors Name)	(Trade) labor on this structure,
	(Trade)
I am the building owner or my NC state license number is $\frac{30052}{1}$	H2/31418L , 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 regulation	s,
Cape Fear AC & Heating Cape Fear Electrical Services	910-483-8790
Contractor's Company Name	Telephone
1139 Robeson St, Fayetteville, NC 28305	sandra.finnerty@capefearair.com
Address	Email Address
30052 H2 / 31418L	
License #	
Structure Owner / Contractor Signature:	Nuson Date: 7/27/18
By signing this application you affirm that you have obtained per purchase permits on their behalf. If doing the work as owner you the listed property for 12 months after completion of the listed wo	understand that you cannot rent, lease or sell

<sup>\*</sup>Company name, address, & phone must match information on license



## MECHANICAL RESIDENTIAL 910-893-7525 www.harnett.org

PERMIT NUMBER MRES1807-0036

The state of the s	PERMIT SUBTYPE: MORE THAN 2 UNITS INCLUDES ELECTRICAL		PARCEL NO: 0505-98-9529.000	
DESCRIPTION: HVAC Chg Out	DATE ISSUED:	DATE EX	ATE EXPIRED:	
PLAN NAME:	<b>ZONING DISTRICT:</b> RA-20R - 0.46 acres (100.0%)			

APPLICANT: CAPE FEAR AC AND HEATING CO	<b>PHONE:</b> (910)483-8790
1139 Robeson St Fayetteville, NC 28305	EMAIL: sandra.finnerty@capefearair.com
CONTRACTOR: CAPE FEAR AC AND HEATING CO	PHONE: (910)483-8790
1139 Robeson St Fayetteville, NC 28305	EMAIL: sandra.finnerty@capefearair.com
OWNER: WEEKS JEREMY	PHONE:
105 ROLLING PINES DR SPRING LAKE, NC 28390 SPRING LAKE, NC 28390	EMAIL:

REQUIRED INSPECTIONS					
INSPECTION TYPE	APPROVAL	DATE	COMMENTS		



## Cash Register Receipt Harnett County

## Receipt Number R330

DESCRIPTION		QTY	PAID
PermitTRAK			\$90.00
MRES1807-0036	Address: 105 ROLLING PINES DR	APN: 0505-98-9529.000	\$90.00
RESIDENTIAL M	ECHANICAL FEES		\$90.00
UP TO 2	UNIT REPLACEMENT	0	\$90.00
TOTAL FEES PAID BY	RECEIPT: R330		\$90.00

Date Paid: Wednesday, August 01, 2018 Paid By: CAPE FEAR AC AND HEATING CO

Cashier: LL

Pay Method: CREDIT CARD 33926

