

Application # URES1808-0013

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: RICHARD & TONIE DELCONTE Phone: 9108508019

Owner (s) Mailing Address: 31 RACQUET CT SANFORD, NC 27332

Land Owner Name (s): RICHARD & TONIE DELCONTE Phone: 9198508019

Construction or Site Address: 31 RACQUET CT SANFORD, NC 27332

PIN # _____ Parcel # _____

Job Cost: 13,171 Description of Work to be done REPLACE WHOLE HOUSE DUAL FUEL SYSTEM & DUCT SYSTEM

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 23253 / 28807-L, 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.

ARS
Contractor's Company Name
517 PYLON DR RALEIGH, NC 27606
Address
23253 / 28807-L
License # _____

919-861-0883
Telephone
ATGREGORY@ARS.COM
Email Address

Structure Owner / Contractor Signature: *Gregory Gregory* Date: 8/6/18

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**

