Application # MRES 1912-002 4

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546 - Ph: 910-893-75:25 - Fx: 910-893-2793 - www.hamett.org/permits Certification of Work Performed By Owner/Contractor (Individual Trade Application)

Owner (s) of Structure:	Eric Whetzel		Phone: 301-302-6077
Owner (s) of Structure.	186 Stonecross Dr.	. Spring Lake NC. 28390	
Owner (s) Mailing Addr			
	Como		Phone: Same
Land Owner Name (s):	Same		Phone: Same
Construction or Site Ad	dress:		
PIN #		Parcel #	
	_Description of Work		ump change out with duct work &
			rk Gas Piping Other
* For Pro	ogress Energy custom	ners we need the premise	
Plumbing: Water/	Sewer Tap	Number of Baths	Water Heater
Specific Directions to J Off Overhills & Ray Rd.			
0.1.01.1.1		Lot#	
Subdivision:			
Arnold Service Co. (Contractors N	will provide t	he HVAC / Electrical (Tra	labor on this structure.
I am the building owne	r or my NC state licer	nse number is 22474 / 3085	59-U , which entitles me to
nerform such work on	the above structure le	egally. All work shall comp	ly with the State Building Code and all
other applicable State			
other applicable State	and local laws, ordina	ances and regulations.	
Arnold Service Co.			910-425-3350
Contractor's Company	Name		Telephone
820 Person St.			Patrick@ascheatandair.com
Address			Email Address
22474 / 30859-U			
License #			, i
Structure Owner / Cor	tractor Signature:	200	Date: 12/17/19
Description (6)	tion was offen that w	u have obtained namical	on from the above listed license holder

By signing this application you affirm that you have obtained permission from the above list purchase permits on their behalf. If doing the work as cowner 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