

Application # MRES2001-0029

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: HECTOR LOPEZ Phone: 4075956407

Owner (s) Mailing Address: 19 SANDY PT
SANFORD NC

Land Owner Name (s): HECTOR LOPEZ Phone: 4075956407

Construction or Site Address: 19 SANDY PT

PIN # _____ Parcel # _____

Job Cost: 8229.00 Description of Work to be done REPLACING LOWER SPLIT HEAT PUMP SYSTEM
MEDIA FILTER AND UV LIGHT IN THE CRAWL SPACE

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.

AMERICAN RESIDENTIAL SERVICES LLC dbd ARS

9198820649

Contractor's Company Name

Telephone

517 PYLON DRIVE RALEIGH NC 27606


8876INPSECTIONS@ARS.COM

Address

Email Address

23253/28807-L

License #

Structure Owner / Contractor Signature: 

Date: 1/16/2020

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**