

Application # _____

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: Carl Day Phone: 910-568-8003

Owner (s) Mailing Address: 124 The Inner Cir. Spring Lake NC 28390

Land Owner Name (s): Carl Day Phone: 910-568-8003

Construction or Site Address: 124 The Inner Cir. Spring Lake NC 28390

PIN # _____ Parcel # _____

Job Cost: _____ Description of Work to be done Split system heat pump change out with the air handler in the attic and an electrical reconnect

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 Arnold Service Co. will provide the HVAC / Electrical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 22474 / 30859-U, 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.

Arnold Service Co.

910-425-3350

Contractor's Company Name

Telephone

820 Person St.

Patrick@ascheatandair.com

Address

Email Address

22474 / 30859-U

License #

Structure Owner / Contractor Signature:  Date: 3/2/23

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**