

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: Michael Knox Phone: 919-800-1182

Owner (s) Mailing Address: 240 Jarrett Bay Ln
Fuquay Varina, NC 27526

Land Owner Name (s): Michael Knox Phone: 919-800-1182

Construction or Site Address: 240 Jarrett Bay LN NC 27526

PIN # _____ Parcel # _____

Job Cost: 2944.10 Description of Work to be done replace 50 gallon water heater (electric) 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:

Head West towards S main st, take nc-210 N to Jarrett Bay LB make a right

Subdivision: _____ Lot #: _____

I SANDRA HOEBER (ARS) will provide the PLUMBING/ELECTRICAL labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 29147/28807, 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 RESCUE ROOTER
Contractor's Company Name
517 PYLON DR RALEIGH NC 27606
Address
29147/28807
License #

919-861-0891
Telephone
SHOEBER@ARS.COM
Email Address

Structure Owner / Contractor Signature:  Date: 7/23/21

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**