

WCMC 1912.0011

Application # _____

Watauga County Central Permitting
Certification of Work Performed by Owner/Contractor
(Individual Trade Application)

Owner (a) of Structure: G.F. Graham Property LLC 919 699 1829
Owner (a) Mailing Address: 3357 Old Hawkins Rd
Local (b) Name (c): G.F. Graham Property LLC
Construction or Site Address: 3357 Old Hawkins Rd
Parcel # _____ Parcel # _____
Job Cost _____ Description of Work to be done: Install Solar Panels

Mechanical: New Unit With Ductwork _____ New Unit Without Ductwork _____ Gas Piping _____ Other _____
Electrical: 200 Amp _____ 400 Amp _____ Service Change _____ Service Relocated _____ Other Other
* For Progress Energy customers see read the program number 300000
Plumbing: Water/Sewer Tap _____ Number of Baths _____ Water Heater _____

Specific Instructions to Job Site Location:

Subdivision _____ Lot # _____

Graham Property LLC Electrical work on this structure.
(Contractor Name) (Trade)

I am the building owner or my NC state license number #22659 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.

Electrical Solutions
Contractor's Company Name
907 Trinity Rd, Dora, NC
Address
22659 29334
License #

910 892-2452 other
910-237-0240 mobile
Telephone
Electrical Solutions NC
Email Address
@gmail.com

Structure Owner / Contractor Signature: [Signature] 12/17/2019

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

2 # 20121067

Mechanical: New Unit With Ductwork ___ New Unit Without Ductwork ___ Gas Piping ___ Other ___

Electrical: 200 Amp ___ 400 Amp ___ Service Change ___ Service Reconnect ___ Other TEMP SERVICE
* For Progress Energy customers we need the premise number

Plumbing: Water/Sewer Tap ___ Number of Baths ___ Water Heater ___

Specific Directions to Job from LICENSEE

Subdivision: _____ Lot #: _____

GARRETT WADE Campbell is providing the ELECTRICAL label on this structure.
(Contractor's Name) (Trade)

I am the building owner or my NC state license number is 22659 which enables 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.

ELECTRICAL SOLUTIONS
Contractor's Company Name

902 FRIENDLY RD, DUNN, NC
Address

22659
License #

910 892-2452 office
910-237-0246 mobile
Telephone

ELECTRICAL SOLUTIONS, NC
Email Address
@gmail.com

Structure Owner / Contractor Signature: [Signature]

Date: 12/17/2019

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

Permit # 50221067