

INDIVIDUAL TRADE APPLICATION

CONSTRUCTION TYPE (circle one): Residential Non-Residential

SITE ADDRESS: 16 B Wedgewood Dr. PIN: 0514-06-4365.000

LANDOWNER: EC Spring Lake LLC Mailing Address: _____

City: Spring Lake State: NC Zip: 28390 Phone: 601-717-8301 Email: j.scott@aptdynamics.com

JOB COST (required): 292.00

DESCRIPTION OF WORK: Running power to outdoor sign for Apartments

Mechanical: New Unit With Ductwork ☐ New Unit Without Ductwork ☐ Gas Piping ☐ Other _____

Electrical: 200 Amp ☒ Greater than 200 Amp ☐ Service Change ☐ Service Reconnect ☐ Other _____

Plumbing: Water Tap/Sewer Connection ☐ Water Heater ☐ Number of Fixtures _____ Other _____

CONTRACTOR INFORMATION

* Must be owner or licensed contractor. Address, company name & phone must match information on license.

Cape Fear Electrical Services, Inc
Contractor's Company Name

1139 Robeson St Fayetteville NC 28305
Address

314182
License #

910-483-8790
Phone
robin.penny@capefearair.com
Email

Mechanical change outs & generator applications require both electrical & mechanical information. If applicable:

Contractor's Company Name

Phone

Address

Email

License #

I am the building owner or NC state licensed contractor, which legally entitles me to perform such work on the above structure. I attest that all work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations. **By signing this application, I affirm that I have obtained permission from the above listed license holder to purchase permits on their behalf.** If doing the work as owner, I understand that I cannot rent, lease, or sell the listed property for 12 months after completion of the listed work.

Signature of Owner/Contractor

Date