

CentralPermitting@Harnett.org (910) 893-7525 ext:1 420 McKinney Pkwy (physical) PO Box 65 (mailing) Lillington, NC 27546

## INDIVIDUAL TRADE APPLICATION

CONSTRUCTION TYPE: Residential ☐ Non-Residential ☑	
SITE ADDRESS: 695 Claude White Rd. Cameron	PIN: 9556-37-5397
LANDOWNER: Kirkpatrick Associates Mailing Address: 10 BOX 2570	
City Burlington State: NC Zip: 27216 Phone: 336-584-1745 = mail: Knewport @ + g and p. com	
JOB COST (required): 1954, 09	
DESCRIPTION OF WORK: Wiring of 2 exhaust fans of 1 wall switch	
Mechanical: New Unit With Ductwork ☐ New Unit Without Ductwo	rk □ Gas Piping □ Other
Electrical: 200 Amp ☐ Greater than 200 Amp ☐ Service Change	ge ☐ 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.	
Otephen Typowski Pipewonx Plumbing	919 - 775 - 1019
LOH McNaill Pd	Stevetyburskid713@gmail.com
Audiess 141 5 2 0	Email 9
License #	
Mechanical change outs & generator applications require both electrical & mechanical information. If applicable:	
mediament change dats a generator applications require both electrical a mechanical midmation. 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	
<u>purchase permits on their behalf.</u> 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.	
Wasten Coasins	10/30/25
Signature of Owner/Qontractor	Date