

INDIVIDUAL TRADE APPLICATION

CONSTRUCTION TYPE (circle one): Residential Non-Residential
SITE ADDRESS: 108 Bocky Run Lane Lillington NC 27544 PIN:
LANDOWNER: Pat Godwin Mailing Address: 108 Form Pun Cane
City: $lillington$ State: NC Zip: 21544 Phone: 9190101944 Email:
JOB COST (required): <u>1933し.00</u>
DESCRIPTION OF WORK: Replace 1.5 ton split system & reconnect using existing electrical
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.
<u>Jackson</u> and Sons <u>919-734-9611</u> Contractor's Company Name Phone
2308 Indian Springs Rad Dudley NC28333 Sharon Diactson and sons. com Address Email
<u>30335</u> License #

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

Kennedy Elec	trical Services LLC Name
Contractor's dompany	Name
PO BOX 88'	1 Mount Olive NC 28365
Address	
U.Zgngn	
License #	

910 375 0122		
Phone		
laurencerennedyclectrical services wm		
Email		

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

5 8 2025 Date

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