

## INDIVIDUAL TRADE APPLICATION

CONSTRUCTION TYPE: Residential ☒ Non-Residential ☐

SITE ADDRESS: 233 Stoney Creek Dr PIN: \_\_\_\_\_

LANDOWNER: Claire Labelle Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: 8606083676 Email: \_\_\_\_\_

JOB COST (required): 9729

DESCRIPTION OF WORK: Replace 2 Ton heat pump air handler in crawl

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.

Michael and Son  
Contractor's Company Name  
4001 Atlantic Ave Raleigh NC 27604  
Address  
33791  
License #

919 390 1088  
Phone  
permitsnc@michaelandson.com  
Email

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

Michael and son.  
Contractor's Company Name  
4001 Atlantic Ave Raleigh NC 27604  
Address  
36174  
License #

919 390 1088  
Phone  
permitsnc@michaelandson.com  
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.

William V  
Signature of Owner/Contractor

8/5/25  
Date