

Owner (s) of Structure: Rodney Reid Phone: 8282285299

Owner (s) Mailing Address: 1157 coachmen way

Land Owner Name (s): Rodney Reid Phone: 8282285299

Construction or Site Address: 1157 coachman way

PIN # _____ Parcel # _____

Job Cost: 1000 Description of Work to be done Adding can lights, ceiling fans, and flood lights on two covered patios

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

Electrical*: 200 Amp <200 Amp ___ Service Change ___ Service Reconnect ___ Other ___

* For Progress Energy customers we need the premise number

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

Specific Directions to Job from Lillington:

Enter carolina lakes community and go to stop sign and turn right.

Subdivision: Carolina Lakes Lot #: _____

I Brent Jackson will provide the Electrical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is L33356, 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.

Jackson & sons electric

Contractor's Company Name

2007 s shoreline dr

Address

L33356


License #

919-352-8071

Telephone

jacksonbrent25@yahoo.com

Email Address

Structure Owner / Contractor Signature:  Date: 11-18-24

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**