

## INDIVIDUAL TRADE APPLICATION

CONSTRUCTION TYPE (circle one): Residential Non-Residential

SITE ADDRESS: 131 South Breeze Way, Fuquay Varina, NC 27526 PIN: 0652-48-3066.000

LANDOWNER: Krishna Pillai Mailing Address: 131 South Breeze Way

City: Fuquay Varina State: NC Zip: 27526 Phone: 919-358-6109 Email: KrishnammaIvenugopalpillai@gmail.com

JOB COST (required): \$12,000

DESCRIPTION OF WORK: install wiring for Ring Flood lights on front + back of home

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.

Alternate Current Solutions DBA Astronatti Electric  
Contractor's Company Name  
PO Box 926, Holly Springs, NC 27540  
Address  
29774  
License #

984-600-0100  
Phone  
permits@callastronatti.com  
Email

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

\_\_\_\_\_  
Contractor's Company Name  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
License #

\_\_\_\_\_  
Phone  
\_\_\_\_\_  
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

6/13/2025  
\_\_\_\_\_  
Date