

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: 301 CO9Chman Way Sanford NC27332 PIN:	
LANDOWNER: Phyan Bakes Mailing Address:	
City: State: 1/C Zip: 27332 Phone: 910-366-6145 Email: Rhyanbatros yahoo. com	
JOB COST (required). \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
DESCRIPTION OF WORK: Install EV Charges	
Mechanical: New Unit With Ductwork □ New Unit Without Ductwork	k □ Gas Piping □ Other
Electrical: 200 Amp ☐ Greater than 200 Amp ☐ Service Chang	e Service Reconnect Other EV Chare
Plumbing: Water Tap/Sewer Connection □ Water Heater □ I	Number of Fixtures Other
CONTRACTOR INFORMATION	
* Must be owner or licensed contractor. Address, company name & phone must match information on license.	
MirBius	919-820-2351
Contractor's Company Name	Phone
1211 Freigne de fayetteville Nr. 28304	Permits on call nublue , com
$\frac{29807-03}{}$	Email
License #	
Mechanical change outs & generator applications require both electrical & mechanical information. 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 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	Date