

## INDIVIDUAL TRADE APPLICATION

CentralPermitting@Harnett.org (910) 893-7525 ext:1 420 McKinney Pkwy (physical) PO Box 65 (mailing) Lillington, NC 27546

CONSTRUCTION TYPE: Residential   Non-Residential □
SITE ADDRESS: 49 Trophy Ridge, Fuguay-Varina NC 27526 PIN: 08 0645 0100 20
LANDOWNER: Corey Vassallo Mailing Address: 49 Trophy Ridge
City: Fuquay-Varinestate: NC Zip: 27526 Phone: 919.656.6049 Email: Corey. vassallo e gmail. Con
JOB COST (required): # 261,98
DESCRIPTION OF WORK: Charge existing Hot Tub Feeder from 50 amp to 60 amp
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.
D Dring Flectric 919.606.7378
Contractor's Company Name
D. Prince Electric  Contractor's Company Name  (e001 Ladish Lane Raleigh NC 27610  Address  Address  Phone  Gamon prince C ymail. com  Email
Address
37926 License #
Mechanical change outs & generator applications require both electrical & mechanical information. If applicable:
Phone
Contractor's Company Name
Address
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 are 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.
101 12 months after completion of the little training
Signature of Owner/Contractor  11. 10 · 25  Date
Signature of Owner/Contractor Date