

INDIVIDUAL TRADE APPLICATION

CONSTRUCTION TYPE (circle one): Residential Non-Residential

SITE ADDRESS: 37 Clearwater Pt. PIN: _____

LANDOWNER: John & Michelle Mullins Mailing Address: 37 Clearwater Pt.

City: Sanford State: NC Zip: 27332 Phone: 910-650-6581 Email: mandj.mullins@yahoo.com

JOB COST (required): \$7929⁰⁰ 910-303-3051

DESCRIPTION OF WORK: HVAC Change Out (Upstairs Unit)

Mechanical: New Unit With Ductwork ☐ New Unit Without Ductwork ☒ Gas Piping ☐ Other _____
Electrical: 200 Amp ☐ Greater than 200 Amp ☐ Service Change ☐ Service Reconnect ☒ Other HVAC change out
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.

ScottServiceCo@hotmail.com

Contractor's Company Name

1621 McArthur Rd. Fayetteville, NC

Address

31436

License #

910-309-2270

Phone

scottserviceco@hotmail.com

Email

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

Turners Electric of Hope Mills

Contractor's Company Name

411 Palmerland Rd. Hope Mills, NC

Address

53621

License #

910-624-3379

Phone

BTurner43@gmail.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.

Jonathan K. Scott
Signature of Owner/Contractor

4/22/2025
Date