

INDIVIDUAL TRADE APPLICATION

CONSTRUCTION TYPE (circle one): Residential Non-ResidentialSITE ADDRESS: 46 blue Box LN PIN: _____LANDOWNER: Patricia Ross Mailing Address: _____City: Cameron State: NC Zip: 28326 Phone: (919) 895-1886 Email: tricia.ross4957@gmail.comJOB COST (required): 11506.00DESCRIPTION OF WORK: 3 ton split system heat pump change outMechanical: 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.

Air Pro Heating & Air Conditioning, LLC

Contractor's Company Name

620 Gillespie St.

Address

34809

License # MECH

Fayetteville, NC

28306

Phone

910-964-4203

Email

AirProheatingNC@gmail.com

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

"Air Pro"

Contractor's Company Name

620 Gillespie St

Address

37137

License # Elect

Fayetteville NC

28304

Phone

910-964-4203

Email

AirProheatingNC@gmail.com

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

6/26/25