

INDIVIDUAL TRADE APPLICATION

CONSTRUCTION TYPE: Residential ☒ Non-Residential ☐

SITE ADDRESS: 158 Glenview Ct

PIN: _____

LANDOWNER: Rudy Tompkins Mailing Address: 158 Glenview Ct

City: Cats State: N.C. Zip: 27521 Phone: 607-242-8908 Email: trudb6@aol.com

JOB COST (required): 10,000

DESCRIPTION OF WORK: Install Goodman 2 ton to replace existing modify to existing duct work

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.

Main Street Heating & Cooling, Inc

Contractor's Company Name

P.O. Box 1032 Benson N.C. 27504

Address

30014

License #

919-894-1363

Phone

mainstreetheatingandcooling@gmail.com

Email

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

Main Street Heating & Cooling, Inc

Contractor's Company Name

P.O. Box 1032 Benson N.C. 27504

Address

50 P.H. 31799

License #

919-894-1363

Phone

mainstreetheatingandcooling@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.


Signature of Owner/Contractor

8/25/25
Date