Harnett COUNTY

emailed Thurs 9/4 — resent Mon 9/8 corrected

CentralPermitting@HarnettCounty.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: 1912 Bullard Rd Fuquay Varina **PIN:** _____

LANDOWNER: Edward Graham Mailing Address: 1912 Bullard Rd

City: Fuquay Varina State: NC Zip: 27526 Phone: Land line 919-567-0147 Email: NO email

JOB COST (required): $10,037

DESCRIPTION OF WORK: replace HP (exterior) / AH (interior closet)

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.

Contractor's Company Name: Cand Fix — Phone: 919-736-6661

Address: 9006 Glenwood Ave Raleigh NC 27617 — Email: install@candfix.com

License #: L 30683 (Mechanical)

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

Contractor's Company Name: Same as above — Phone: same

Address: same — Email: _____

License #: 30776 SPPH (electrical)

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 9/5/25