



INDIVIDUAL TRADE APPLICATION

CONSTRUCTION TYPE: Residential ✓ Non-Residential □
SITE ADDRESS: Same as mailing
LANDOWNER: Scot Campbell Mailing Address: 126 Victoria Hills Dr. S
City: Fuquay-Van State: NC zip: 27526 Phone: 919-291-1121 Email: horsekattleaol.com
JOB COST (required): \$\frac{\lambda}{\lambda}\lambda_1 \lambda_2 \lambda_0 \lambda_0
DESCRIPTION OF WORK: Replacing old System with a new splitheat pump system for crawl space HVAC
Mechanical: New Unit With Ductwork □ New Unit Without Ductwork □ Gas Piping □ Other Charge いって
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.
Phone 1099 HVAC TVC Contractor's Company Name 109 - 567 - 0693 Phone
930 Windy Road Afex, NC 27502 Workshare Workshare Gymail. Com
Address
L23348
License #
Mechanical change outs & generator applications require both electrical & mechanical information. If applicable:
Daniel Page-Electrician 410-292-1392
Daniel Voye-Electrician Contractor's Company Name 109 Amsterdam Dr. Archer lodge, NC 27527 Address Address
108 Amsterdam Dr. Archer lodge, NC 27527 daniel page 35@gmail.com
Address
L286004
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 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.
Stanley Foga allolons
Signature of Owner/Contractor Date