



## INDIVIDUAL TRADE APPLICATION

| CONSTRUCTION TYPE (circle one): Residential Non-Residential  |
|--|
| SITE ADDRESS: 38 Checkmate Court PIN:  |
| LANDOWNER: Sara Keagan Mailing Address: 38 Checkmate Court   |
| City: Cameron State: Nc Zip: 28326 Phone: 919.741.7507 Email: SBERNOLD @ GmAil. Com  |
| City: Cameron State: Nc Zip: 28326 Phone: 414-17507 Email: 350-17507   |
| JOB COST (required):   |
| DESCRIPTION OF WORK: Like for Like Hvac swap excluding Ductwork 3 TOW HP Split in Attic  |
| 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.   |
| Tier I Heating and Air Contractor's Company Name  910. 556. 1444  Phone  |
| 3459 us thoy 1 Vass, Nc 28394  Address   |
| Mechanical change outs & generator applications require both electrical & mechanical information. If applicable:   |
| 910.556.1444   |
| Contractor's Company Name Phone  |
| Contractor's Company Name  3459 us Itury 1 Vass Nc 28394  Address  Phone  Michele Tierl - hvac. com  Email   |
| <u>38298</u><br>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.  Date |
| Signature of Owner/Contractor Date   |
|  |