

CentralPermitting@Harnett.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: 42 Gray Pine Way Sanford, NC 27332 PIN:	
LANDOWNER: David Lozada Melendez Mailing Address: 42 Gray Pine Way	
City: Sanford State: NC Zip: 27332 Phone: 407-810-2728 Email: dlozadaek 38@hotmail. Com	
JOB COST (required): $544,500$	
DESCRIPTION OF WORK: Install new mini split system to serve garage space. Pull circuit wire	
Mechanical: New Unit With Ductwork \square New Unit Without Ductwork \square	Gas Piping ☐ Other <u>New install</u>
Electrical: 200 Amp ☐ Greater than 200 Amp ☐ Service Change ☐	Service Reconnect Other Other
Plumbing: Water Tap/Sewer Connection □ Water Heater □ Num	nber of Fixtures Other
CONTRACTOR INFORMATION	
* Must be owner or licensed contractor. Address, company name & phone must match information on license.	
Contractor's Company Name Pho	one
930 Windy Rd Apex, NC 27502 in	19-567-0653 Softogghvacægmail.com
	ail
13348	
License #	
Mechanical change outs & generator applications require both electrical & mechanical information. If applicable:	
Daniel Page	-110-292-1392
A CONTRACTOR OF THE CONTRACTOR	-10-292-1392 one
	uniel Page 35@ gmail. com
Address Ema	ail
0004	
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 Fogg	10/15/2025
Signature of Owner/Contractor	Date