Application # PRFS1903-

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.harnett.org/permits Certification of Work Performed By Owner/Contractor (Individual Trade Application)

Owner (s) of Structure:	WUEST	DONALD G & WUEST CYNTHIA L	Phone: 919-343-2184
Owner (s) Mailing Addre	ess: 54 S	TARBOARD TACK	
	SAN	FORD, NC 27332	
Land Owner Name (s):	WUEST	DONALD G & WUEST CYNTHIA L	Phone: 919-343-2184
Construction or Site Add	dress: 54	STARBOARD TACK SANFORD, NC 2733	2
PIN # 9585-99-7245.000		Parcel # 03958510 011	
Job Cost: \$15,832	_Descrip	tion of Work to be done SHOWER CONV	ERSION W/VALVE
Mechanical: New Unit	With D	uctwork New Unit Without Ductwor	k Gas Piping Other
		O Amp Service Change Se	
Plumbing: Water/S	Sewer Ta	p Number of Baths V	later Heater
	ECUE NO	Jilington: C. LEFT ON BUFFALO LAKE RD, LEFT ON TON CAPTAIN HARBOR, RIGHT ON STAF	
Subdivision:		Lot #:	
REBATH OF THE TRIAN		will provide the PLUMBING (Trad	labor on this structure.
I am the building owner	or my N	C state license number is 8776	, which entitles me to
perform such work on th	e above	structure legally. All work shall comply	with the State Building Code and all
other applicable State a	nd local	laws, ordinances and regulations.	
REBATH OF THE TRIANG	GLE		919-782-7599
Contractor's Company	Vame		Telephone
8817 WESTGATE PARK	DR #112	RALEIGH NC, 27617	JOSH@TRIANGLEREBATH.COM
Address 8776 License #	•		Email Address
Structure Owner / Contr	actor Sig	ghature:	Date: 3/21/19
purchase permits on the	ir behalf	firm that you have obtained permission. If doing the work as owner you unders after completion of the listed work.	from the above listed license holder (stand that you cannot rent, lease or se

*Company name, address, & phone must match information on license