Application # PRES 1904-0011

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

Owner (s) of Structure:	BLAIR JO		Phone: 503-507-4354
Owner (s) Mailing Addre	ss: 189 F	EATHERWOOD DR	
	LILLI	NGTON, NC 27546	
Land Owner Name (s):	BLAIR JO	SHUA & DEL VALLE-BLAIR SARA	Phone: 503-507-4354
Construction or Site Add	ress: 189	HEATHERWOOD DR, LILLINGTON, NC	27546
PIN # 0507-44-0143.000		Parcel # 03958901 102	1 13
Job Cost: \$23,600 NEW VANITY TOP	_Descript	ion of Work to be done SHOWER CONV	
Mechanical: New Unit	With Du	ctwork New Unit Without Ductwor	k Gas Piping Other
Electrical*: 200 Amp	<20 gress En	Amp Service Change Serviergy customers we need the premise r	ce Reconnect Other number
Plumbing: Water/S	Sewer Ta	p Number of Baths V	Vater Heater
Specific Directions to Jo NC 27 OUT FROM LILLIN LEFT ON HEATHERWOOD	IGTON TO	Ilington: DWARDS BARBECUE, TAKE LEFT ON DO	DCS RD, LEFT ON EXECUTICVE DR
Subdivision: OAKMONT	PH2	Lot #:	181
(Contractors N	ame)	rill provide the PLUMBING (Trad	labor on this structure. le) , which entitles me to
		structure legally. All work shall compl	
		aws, ordinances and regulations.	
REBATH OF THE TRIAN	GLE		919-744-7832
Contractor's Company Name 8817 WESTGATE PARK DR #112; RALEIGH, NC, 27617			Telephone JOSH@TRIANGLEREBATH.COM
Address 8776 License # Structure Owner / Conti			Email Address Date: 4/12/19
purchase permits on the	eir behalf	firm that you have obtained permission. If doing the work as owner you under after completion of the listed work.	n from the above listed Ilcanse holder stand that you cannot rent, lease or se

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