



PLUMBING RESIDENTIAL

910-893-7525

www.harnett.org

PERMIT NUMBER

PRES1910-0022

JOB ADDRESS: 466 ROBESON ST	PERMIT SUBTYPE: MINIMUM PLUMBING U003C IS 2 FIXTURES	PARCEL NO: 0514-57-5309.000
DESCRIPTION: tub to shower conversion	DATE ISSUED:	DATE EXPIRED:
PLAN NAME:	ZONING DISTRICT: RA-20M - 0.35 acres (100.0%)	

APPLICANT: LAHR SAMUEL L 466 ROBESON ST SPRING LAKE, NC 28390 SPRING LAKE, NC 28390	PHONE: EMAIL:
CONTRACTOR: REBATH OF THE TRIANGLE-RALEIGH 8817 WESTGATE PARK DR SUITE 112 RALEIGH, NC 27617	PHONE: (919)210-1173 EMAIL: josh@trianglerebath.com
OWNER: LAHR SAMUEL L 466 ROBESON ST SPRING LAKE, NC 28390 SPRING LAKE, NC 28390	PHONE: EMAIL:

REQUIRED INSPECTIONS

INSPECTION TYPE	APPROVAL	DATE	COMMENTS
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