



PLUMBING RESIDENTIAL

910-893-7525

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PERMIT NUMBER

PRES1912-0013

JOB ADDRESS: 355 MOONLIGHT DR	PERMIT SUBTYPE: MINIMUM PLUMBING U003C IS 2 FIXTURES	PARCEL NO: 0665-80-2349.000
DESCRIPTION: tub to shower conversion w/valve	DATE ISSUED: 12/20/2019	DATE EXPIRED:
PLAN NAME:	ZONING DISTRICT: RA-30 - 0.63 acres (100.0%)	

APPLICANT: REBATH OF THE TRIANGLE-RALEIGH 8817 WESTGATE PARK DR SUITE 112 RALEIGH, NC 27617	PHONE: (919)210-1173 EMAIL: josh@trianglerebath.com
CONTRACTOR: REBATH OF THE TRIANGLE-RALEIGH 8817 WESTGATE PARK DR SUITE 112 RALEIGH, NC 27617	PHONE: (919)210-1173 EMAIL: josh@trianglerebath.com
OWNER: GOOLD JANA M 355 MOONLIGHT DR FUQUAY-VARINA, NC 27526 FUQUAY VARINA, NC 27526	PHONE: EMAIL:

REQUIRED INSPECTIONS

INSPECTION TYPE	APPROVAL	DATE	COMMENTS
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