

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: MATUSIK DAVID M & MATUSIK ROSA M Phone: 919-264-8193

Owner (s) Mailing Address: 259 VANSTORE DR
FUQUAY VARINA, NC 27526

Land Owner Name (s): MATUSIK DAVID M & MATUSIK ROSA M Phone: 919-264-8193

Construction or Site Address: 259 VANSTORE DR FUQUAY VARINA, NC 27526

PIN # 0655-35-4518.000 Parcel # 080655 0039 04

Job Cost: \$9932 Description of Work to be done TUB to SHOWER CONVERSION W/VALVE

Mechanical: New Unit With Ductwork New Unit Without Ductwork Gas Piping Other

Electrical*: 200 Amp <200 Amp Service Change Service Reconnect Other
* For Progress Energy customers we need the premise number

Plumbing: Water/Sewer Tap Number of Baths Water Heater

Specific Directions to Job from Lillington:

TAKE US 401 N TO SHERMAN LAKES DR; TAKE LEFT; THEN LEFT ON VANSTORE DR

Subdivision: N/A Lot #: _____

I REBATH OF THE TRIANGLE will provide the PLUMBING labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 29933, which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations.

REBATH OF THE TRIANGLE
Contractor's Company Name
8817 WESTGATE PARK DR #112; RALEIGH, NC, 27617
Address
29933
License # _____

919-744-7832
Telephone
JOSH@TRIANGLEREBATH.COM
Email Address

Structure Owner / Contractor Signature:  Date: 11/11/2020

By signing this application you affirm that you have obtained permission from the above listed license holder to purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or sell the listed property for 12 months after completion of the listed work.

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