



# PLUMBING RESIDENTIAL

910-893-7525

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PERMIT NUMBER

**PRES2110-0007**

<b>JOB ADDRESS:</b> 1755 WADE STEPHENSON RD	<b>PERMIT SUBTYPE:</b> MINIMUM PLUMBING U003C IS 2 FIXTURES	<b>PARCEL NO:</b> 0636-12-0400.000
<b>DESCRIPTION:</b> tub to shower conversion	<b>DATE ISSUED:</b> 10/11/2021	<b>DATE EXPIRED:</b>
<b>PLAN NAME:</b>	<b>ZONING DISTRICT:</b> RA-30 - 0.91 acres (100.0%)	

<b>APPLICANT:</b> REBATH OF THE TRIANGLE-RALEIGH 8817 WESTGATE PARK DR SUITE 112 RALEIGH, NC 27617	<b>PHONE:</b> (919)782-7599 <b>EMAIL:</b> josh@trianglerebath.com
<b>CONTRACTOR:</b> REBATH OF THE TRIANGLE-RALEIGH 8817 WESTGATE PARK DR SUITE 112 RALEIGH, NC 27617	<b>PHONE:</b> (919)782-7599 <b>EMAIL:</b> josh@trianglerebath.com
<b>OWNER:</b> JACKSON MITCHELL 1755 WADE STEPHENSON RD HOLLY SPRINGS, NC 27540 HOLLY SPRINGS, NC 27540-0000	<b>PHONE:</b> <b>EMAIL:</b>

## REQUIRED INSPECTIONS

INSPECTION TYPE	APPROVAL	DATE	COMMENTS
FINAL**			
ROUGH IN			