

Central permitting@harnett.org

Application # \_\_\_\_\_

**Harnett County Central Permitting**

Mailing Address - PO Box 65 Lillington, NC 27546 – Physical Address – 420 McKinney PKWY Lillington NC 27546

Ph.: 910-893-7525 - Fax: 910-893-2793 - www.harnett.org/permits

Certification of Work Performed By Owner/Contractor

(Individual Trade Application)

Owner (s) of Structure: MICHAEL EASON Phone: 919-523-1301

Owner (s) Mailing Address: 107 PINE CROFT RD

Land Owner Name (s): MICHAEL EASON Phone: 919-523-1301

Construction or Site Address: 107 PINE CROFT RD

PIN # 0662-77-5709.000 Parcel # \_\_\_\_\_

Job Cost (Required): 9250 Description of Work to be done TUB TO SHOWER CHANGEOUT  
SAME LOCATION

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 1 Water Heater \_\_\_

Specific Directions to Job from Lillington:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Subdivision: \_\_\_\_\_ Lot #: \_\_\_\_\_

I MALCOM VERNON will provide the PLUMBING labor on this structure.  
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 14507, 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.

MALCOM VERNON DBA BATHFITTER  
Contractor's Company Name  
182 CLEVELAND CROSSING GARNER 27529  
Address  
14507 P-1  
License #

919-218 4953  
Telephone  
PLUMBER247MV@OUTLOOK.COM  
Email Address

Structure Owner / Contractor Signature: [Signature] Date: 2-13-23

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**

Faxed or Mailed application could have an approximately 1-5 day process time

2-THRU-11 1001 5077710N  
FIN-0662-77-5709.000

# BATH FITTER®

EACH FRANCHISE INDEPENDENTLY OWNED & OPERATED  
**Martin Martin Renovations, Inc.**  
 www.bathfitter.com

- 1187 Shields Road  
Kernersville, NC 27284  
Tel: (336) 379-7899  
Toll Free: 1-866-379-7899  
Fax: (336) 992-0124
- 8200 Arrowridge Blvd., Unit G  
Charlotte, NC 28273  
Tel: (704) 525-8799  
Toll Free: 1-866-854-4399  
Fax: (704) 525-8964
- 8956 NW 24 Terrace  
Doral, FL 33172  
Tel: (786) 517-8699  
Toll Free: 1-866-633-6778  
Fax: (786) 517-8660
- 182 Cleveland Crossing  
Garner, NC 27529  
Tel: (919) 662-9899  
Toll Free: 1-888-662-9899  
Fax: (919) 662-8197
- 3822 US Hwy 421, Ste 140  
Wilmington, NC 28401  
Tel: (910) 210-4099  
Toll Free: 1-866-677-2284  
Fax: (910) 210-4098
- 6265 S. Valley View Road, Suite D  
Las Vegas, NV 89118  
Tel: (702) 996-8901  
Toll Free: 1-844-519-1563  
Toll: (702) 331-0468  
Fax: (702) 331-0468  
License # 0080410 / 0080431 / 0080731

CUSTOMER INFO

ESTIMATE DATE 1/25/2023 EOI # 14472  
 NAME: Michael Eason  
 ADDRESS: 107 Pine Croft Rd  
 CITY/STATE/ZIP: Angier, NC 27501  
 TEL: H( ) 919-523-1301 MOBILE( ) \_\_\_\_\_  
 BILLING ADDRESS \_\_\_\_\_  
 SAME AS ABOVE \_\_\_\_\_  
 EMAIL ADDRESS michael.eason@gmail.com

<b>Bathtub</b>	<input type="checkbox"/> Liner	<input type="checkbox"/> Free Standing	<b>Drain</b>	<input type="checkbox"/> LH	<input type="checkbox"/> RH	
Tub Name	Mold#	Skirt Type	Rail Size	Template Size		
Color	<input type="checkbox"/> White	<input type="checkbox"/> White Marble	<input type="checkbox"/> Ivory Marble	<input type="checkbox"/> Pearl	<input type="checkbox"/> Slip Resistant Coating	
<b>Shower Base</b>	<input type="checkbox"/> Formed <input checked="" type="checkbox"/> Free Standing <input type="checkbox"/> Flat <input type="checkbox"/> Easy Access <input type="checkbox"/> Other					
Drain	<input checked="" type="checkbox"/> LH	<input type="checkbox"/> RH	<input type="checkbox"/> Center	Item# SHO127		✓
Color	<input checked="" type="checkbox"/> White	<input type="checkbox"/> White Marble	<input type="checkbox"/> Ivory Marble	<input type="checkbox"/> Pearl	<input type="checkbox"/> Slip Resistant Coating	
<b>Wall</b>	<input type="checkbox"/> Smooth <input type="checkbox"/> 4" Tile <input type="checkbox"/> 6" Tile <input type="checkbox"/> 10" Tile <input type="checkbox"/> 12" Tile <input type="checkbox"/> 13" Tile <input type="checkbox"/> Rimini <input checked="" type="checkbox"/> Genova					
	<input type="checkbox"/> Subway <input type="checkbox"/> Subway w/ Diag. Inlay <input type="checkbox"/> 7.5' <input checked="" type="checkbox"/> 11' <input type="checkbox"/> 13' Item# 090-132-TW-6x22					✓
Color	<input checked="" type="checkbox"/> White	<input type="checkbox"/> White Marble	<input type="checkbox"/> Ivory Marble	<input type="checkbox"/> Pearl		
<b>Ceiling</b>	<input type="checkbox"/> Flat <input type="checkbox"/> Dome <input type="checkbox"/> 4' <input type="checkbox"/> 4 1/2' <input type="checkbox"/> 5' <input type="checkbox"/> 5 1/2' Item#					
Color	<input type="checkbox"/> White	<input type="checkbox"/> White Marble	<input type="checkbox"/> Ivory Marble	<input type="checkbox"/> Pearl		
<b>Tub/Shower Doors</b>	Sliders <input type="checkbox"/> TD		<input checked="" type="checkbox"/> SD SD-010-CN-60			
	<input type="checkbox"/> BF Pivot#		<input type="checkbox"/> 9" <input type="checkbox"/> 17" BF Panel <input type="checkbox"/> Outside Vendor (See Addendum)			✓
<b>Plumbing</b>	<input checked="" type="checkbox"/> Drain Kit <input type="checkbox"/> Chr <input type="checkbox"/> Brass <input checked="" type="checkbox"/> BN <input type="checkbox"/> V. Bronze <input type="checkbox"/> ORB					
<b>Valve/Fixture</b>	<input checked="" type="checkbox"/> Delta Linden 14 <input type="checkbox"/> Handheld <input type="checkbox"/> Slidebar <input type="checkbox"/> Diverter					✓
Item#	T14294-SS	Item#		Item#		
<b>Accessories</b>						
<b>Curtain Rods</b>	<input type="checkbox"/> Tension <input type="checkbox"/> Curved <input type="checkbox"/> Straight <input type="checkbox"/> Other <input type="checkbox"/> Curtain Liner <input type="checkbox"/> Ring					
Color	<input type="checkbox"/> Chrome <input type="checkbox"/> BN <input type="checkbox"/> V Bronze <input type="checkbox"/> White <input type="checkbox"/> Pearl Item#					
<b>Grab Bar</b>	<input type="checkbox"/> 9" <input type="checkbox"/> 16" <input type="checkbox"/> 18" <input type="checkbox"/> 24" <input type="checkbox"/> 32" <input type="checkbox"/> Other <input type="checkbox"/> Smooth Finish or Knurled Finish					
Color	<input type="checkbox"/> Chr <input type="checkbox"/> Brass <input type="checkbox"/> Wht <input type="checkbox"/> Prl <input type="checkbox"/> BN <input type="checkbox"/> V Bronze Item#					
<b>Acrylic Shelf</b>	<input type="checkbox"/> 20" Oval <input type="checkbox"/> 25" Standard Item#					
<b>Corner Shelf</b>	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Double <input checked="" type="checkbox"/> Tower		Item# ACC097		ACC380	✓
<b>Towel Bar/Toilet Paper Holder</b>	<input type="checkbox"/> Standard <input type="checkbox"/> Oval Item#					
<b>Soap Dish</b>	<input type="checkbox"/> Standard <input type="checkbox"/> Twin <input type="checkbox"/> Oversized <input type="checkbox"/> 1/2 Moon <input type="checkbox"/> Oval Item#					
<b>Seat</b>	<input type="checkbox"/> Acrylic Corner <input type="checkbox"/> Folding <input type="checkbox"/> Other					
<b>Services</b>	<input type="checkbox"/> Wall Repair <input checked="" type="checkbox"/> Remove Existing Tub/Wall <input type="checkbox"/> Remove & Dispose Doors					
	<input type="checkbox"/> Wall Ext. <input type="checkbox"/> Wall Returns <input type="checkbox"/> Window					✓
	<input type="checkbox"/> Other <input checked="" type="checkbox"/> H & T/Permit Fee					
<b>Wainscoting</b>	<input type="checkbox"/> Smooth <input type="checkbox"/> Beadboard <input type="checkbox"/> Other <input type="checkbox"/> White <input type="checkbox"/> White Marble <input type="checkbox"/> Ivory Marble <input type="checkbox"/> Pearl					

COMMENTS - Yr Home Built 1995

SUB TOTAL \$	11,640
DISCOUNT \$	-2,390
OTHER \$	
<b>TOTAL \$</b>	<b>9,250</b>

**INSTALLATION** SCHEDULED FOR \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_ COMPLETED ON \_\_\_\_\_ Date \_\_\_\_\_

INSTALLED BY \_\_\_\_\_

*Michael Eason*  
Customer \_\_\_\_\_ Date 1/25/2023

*[Signature]*  
Bath Fitter Representative \_\_\_\_\_ Date 1/25/2023

I understand that Bath Fitter® and its representatives are not qualified to advise me on mold detection or clean-up. Nevertheless, I choose not to have an independent mold inspection performed.

<input checked="" type="checkbox"/> OPTION <sup>with 9002</sup> (A)	\$ 2,500	DEPOSIT \$ 6,750
	CASH, CHECK, CREDIT, DEBIT DUE ON COMPLETION	
<input type="checkbox"/> OPTION (B)	\$ _____	DEPOSIT \$ _____
	FINANCING BALANCE TO BE FINANCED	