

INDIVIDUAL TRADE APPLICATION

CONSTRUCTION TYPE (circle one): Residential Non-Residential

SITE ADDRESS: 425 Kingsbrook C1's PIN: _____

LANDOWNER: Lisa Robinson Mailing Address: _____

City: Kuregay State: NC Zip: 27526 Phone: 919 924 1931 Email: NCparolelady@hotmail.com

JOB COST (required): 8000

DESCRIPTION OF WORK: Remove & replace master bath tub & shower fixture

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

Electrical: 200 Amp ☐ Greater than 200 Amp ☐ Service Change ☐ Service Reconnect ☐ Other _____

Plumbing: Water Tap/Sewer Connection ☐ Water Heater ☐ Number of Fixtures 1 Other ☒

CONTRACTOR INFORMATION

* Must be owner or licensed contractor. Address, company name & phone must match information on license.

Branch Home Improvement
Contractor's Company Name
992 Hostens Pond Rd Apex
Address
NC 27523
75481
License #

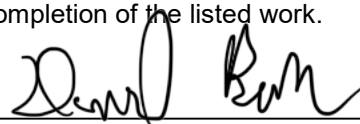
919-795-1807
Phone
Donire/GBranchHomeImprovement.com
Email

Mechanical change outs & generator applications require both electrical & mechanical information. If applicable:

Rushin Plumbing
Contractor's Company Name
7581 NC 210
Address
33242
License #

919 410 5967
Phone
RushinPlumbing@gmail.com
Email

I am the building owner or NC state licensed contractor, which legally entitles me to perform such work on the above structure. I attest that all work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations. **By signing this application, I affirm that I have obtained permission from the above listed license holder to purchase permits on their behalf.** If doing the work as owner, I understand that I cannot rent, lease, or sell the listed property for 12 months after completion of the listed work.


Signature of Owner/Contractor

4/30/25
Date