

CentralPermitting@Harnett.org (910) 893-7525 ext:1 420 McKinney Pkwy (physical) PO Box 65 (mailing) Lillington, NC 27546

INDIVIDUAL TRADE APPLICATION

CONSTRUCTION TYPE: Residential ☑ Non-Residential □	
SITE ADDRESS: 41 Na Ssau Ln Sanford	PIN:
LANDOWNER: Frankie Fournier Mailing Address:	same
City: Sanford State: NC zip: 2 Phone: 850-3190 E	mail:
JOB COST (required):	
DESCRIPTION OF WORK: tub to shower	
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 □ Num	ber of Fixtures Other
CONTRACTOR INFORMATION	
	0-313-6868
	ustin. stellen@rebath.com
Address 3690 License #	2211
Mechanical change outs & generator applications require both electrical	I & machanical information If applicable:
mechanical change outs & generator applications require both electrical	и и теспатса ппотавоп. п аррпсавте.
Contractor's Company Name Pho	ne
Address	ail
License #	
I am the building owner or NC state licensed contractor, which legally entitles I attest that all work shall comply with the State Building Code and all other regulations. By signing this application, I affirm that I have obtained per purchase permits on their behalf. If doing the work as owner, I understand for 12 months after completion of the listed work.	er applicable State and local laws, ordinances and rmission from the above listed license holder to
to See	9-10-25
Signature of Owner/Contractor	Date