

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

## INDIVIDUAL TRADE APPLICATION

CONSTRUCTION TYPE (circle one): Residential Non-Resid	ential NC
SITE ADDRESS: 201 Per Simmon Tree Dr	Cameron PIN:
LANDOWNER: Sulva+ Jeffrew Dow Mailing Address	ss:_Same
City Cameron State: N C Zip: Phone:	
JOB COST (required):	
DESCRIPTION OF WORK: Install water sof	tener + reverse osmosi's unit
Mechanical: New Unit With Ductwork □ New Unit Without Ductwork	rk  Gas Piping  Other
Electrical: 200 Amp $\square$ Greater than 200 Amp $\square$ Service Change	ge   Service Reconnect   Other
Plumbing: Water Tap/Sewer Connection □ Water Heater □	Number of Fixtures Other
CONTRACTOR INFORMATION	
* Must be owner or licensed contractor. Address, company name	
Matthew's Plumbing Solutions Contractor's Company Name	Phone eKraske@ orcabluewater.com
Contractor's Company Name	Phone o Kracke @ orcabluewater. COI
515 S. New Hope Rd #106 Raleigh NC Address	Email
33606	
License #	
Mechanical change outs & generator applications require both electrical & mechanical information. If applicable:	
Contractor's Company Name	Phone
Address	Email
License #	
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.	
	07 25 2025
Signature of Owner/Contractor	Date