



TOWN OF LILLINGTON TRADE PERMIT APPLICATION

Planning & Inspections Department
106 West Front Street, PO Box 296 Lillington NC 27546 • phone 910-893-2654

Check one:

Residential

Non Residential

Check the type of work to be performed and description:

Electrical Only (Electrical Contractor)
Description _____

HVAC Installation or Change-Out (Mech & Elec Contractor)

Mechanical Only (Mechanical Contractor)
Description _____

Water Heater-Gas (Plumbing Contractor)

Water Heater-Elec (Plumbing & Electrical Contractor)

Plumbing Only (Plumbing Contractor)
Description _____

Water Heater-Tankless (Elec, Mech & Plumb Contractors)

Owner Information: Name _____ Phone _____
Home Street Address _____ City _____ State _____ Zip _____
Lot Number _____ Subdivision _____ Phase _____

Site Location Information (if different from Owner's Home Address):
Address _____ City _____ State _____ Zip _____
Lot Number _____ Subdivision _____ Phase _____

Electrical Contractor Information:
Company Name – Please Print _____ *NC State License # _____
Authorized Electrical Contractor's Signature _____ Phone _____
Street Address _____ City _____ State _____ Zip _____

Mechanical Contractor Information:
Company Name – Please Print _____ *NC State License # _____
Authorized Mechanical Contractor's Signature _____ Phone _____
Street Address _____ City _____ State _____ Zip _____

Plumbing Contractor Information:
Company Name – Please Print _____ *NC State License # _____
Authorized Plumbing Contractor's Signature _____ Phone _____
Street Address _____ City _____ State _____ Zip _____

*State license number must match name of company. State license number is not required if homeowner (owner occupied) is the contractor and the cost does not exceed \$30,000.

Cost of work being performed: Electrical \$ _____ Mechanical \$ _____ Plumbing \$ _____ Total \$ _____

Please Contact _____ when permit is ready.
(Name) (Phone number)

Applicant Name - Print - _____

Applicant Signature _____ **Date** _____

