



CITY OF MEBANE INSPECTIONS
CHANGE/ADDITION OF CONTRACTOR
Mailing Address 106 E. Washington St. Mebane NC 27302
102 S. Fifth St. Mebane NC 27302
Phone: (919) 563-9990
Fax: (919) 563-9506
www.cityofmebane.com
inspections@cityofmebane.com

DATE:
ADDRESS:

PERMIT:
FEE:

PRESENT CONTRACTORS:

GENERAL CONTRACTOR:	STATE LICENSE #:
ELECTRICAL CONTRACTOR:	STATE LICENSE #:
MECHANICAL CONTRACTOR:	STATE LICENSE #:
PLUMBING CONTRACTOR:	STATE LICENSE #:

NEW CONTRACTORS:

GENERAL CONTRACTOR:	STATE LICENSE #:
ADDRESS:	PHONE #:
ELECTRICAL CONTRACTOR:	STATE LICENSE #:
ADDRESS:	PHONE #:
MECHANICAL CONTRACTOR:	STATE LICENSE #:
ADDRESS:	PHONE #:
PLUMBING CONTRACTOR:	STATE LICENSE #:
ADDRESS:	PHONE #:

SIGNATURE _____

DATE _____

Printed name of person authorized making change _____

Permit staff receiving request _____

Only the current Property Owner is authorized to change the General contractor. A new Workers Compensation Form will be required with each change of General contractor. The current property owner or General Contractor may change contractors.