



GRANVILLE COUNTY INSPECTIONS

DEPARTMENT

122 WILLIAMSBORO STREET, P.O. BOX 877

OXFORD, NC 27565

(919) 603-1326 OR FAX (919)693-6794

Sub Contractor Sign Off Form

Contractor Name: _____

License #: _____

I, _____, will be doing

or did _____ work on the following

permits: Permit #: _____ Address or Subdivision/

Lot #: _____

Contractor Signature or agent

_____ County, North Carolina

I certify that _____ personally appeared before me this _____ day
of _____, _____ acknowledging that he or she signed the foregoing document.

Notary Public (signature & printed name)

Commission expires: _____