Building Permit Application

Phone 252.255.1234 - Fax 252.255.1236

Owners Name:	Contractor:
Address:	Address
City/State/Zip	City/State/Zip
Phone:	Phone
Mobile:	Mobile
Email	Email
Other:	License # Class:

PERMIT INFORMATION

Permit No. [20 -] Issue Date: [/ / 20] Estimated Project Cost: $

Permit Type: *Circle* B = Building E = Electrical F = Fire M = Mechanical P = Plumbing G = Gas
P = Pool HT = Hot tub S = Sign J = Joint Use D = Demolition

Building Use & Occupancy: *Circle* C = Commercial / MF=Multi-family / SF=Single Family / DP=Duplex
Number of units [ ] TH = Town House / MFH = Manufactured

PROPERTY - PLANNING AND ZONING

Project Address

Subdivision: Lot: Block: Section: Phase:		
Zoning District:	PIN #:	Parcel #
Lot square footage:	Proposed lot coverage %	Lot coverage allowed %
Setback – Front ft	Setback Rear: ft	Side ft / St. Side ft
Flood Zone: *Circle* V AE X C	Base Flood Elevation: ft	Lowest habitable floor elev. ft In
# Bedrooms: # Occupants:	Required parking spaces	Lot of record date
Building height = Highest point from roof ridge to finished grade at center of structure ft In		Lot elevation (pre – post fill or cut) ft in

CONSTRUCTION INFORMATION - FEES - ESTIMATES

Type foundation:	Type roof & pitch:	Insulation: F [ ] W [ ] C [ ]
Exterior finish	Building Height ft in	Type heating:
Total heated area sf	Mean roof height: ft in	Chimney/fireplace
Total unheated area sf	Height to top plate: ft in	Designer:
Design pressure:	Number of stories:	Engineer:
	Storage area below BFE (Y) (N)	Permanent or Speculation Project *circle*

GENERAL DESCRIPTION OF WORK:

PROJECT COST ESTIMATES	FEE TYPE		FEES
Building: $	Heated area	square feet →	$
Electrical: $	Unheated area	square feet →	$
Mechanical: $	Pool / Spa / Other	→	$
Plumbing $	Remodel / Other	→	$
$	Home Owners Recovery Fee	→	$
$	Site Plan Review Fee	→	$
Est. Project cost: $	TOTAL FEES DUE	→	$

NOTICE

This permit becomes null and void if work or construction authorized under this permit is not commenced within 6 months or if after commencement of work no required inspection is requested and approved within any 12-month period thereafter or for substantial deviations from plans. Permit may be withdrawn if occupancy occurs before a Certificate of Compliance is issued. *I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of this permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulation construction or the performance of construction*. When properly validated this is your permit.

Owner / Authorized Agent Date

Approved For Issuance – Building Inspector Date

Other Approvals	Required Y - N	Received – Approvals - Notations
Zoning		
Septic		
Water		
Soil Erosion		
CAMA		
FEMA		
Wet Lands		
Asbestos rpt		
Sprinklers		
Surety Bond:		
Workers Comp:		
OFFICE NOTES		