

Office of County Fire Marshal

304 S. Morgan Street Rm 152 Roxboro, NC 27573 Office (336) 330-2315



CONSTRUCTION PERMIT APPLICATION

Fire Suppression: New Insta	II Renovate/Modify Bldg. Sq. Ft.
Fire Sprinkler: New Insta	nll 🔲 Renovate/Modify Bldg. Sq. Ft.
Fire Alarm: New Insta	II 🗌 Renovate/Modify Bldg. Sq. Ft.
•	nstall Renovate/Modify Remove ground Above Ground # of Tanks
Other:	
Description of Work: Plans Su	ıbmitted ☐ Yes ☐ No
Project Information: (Must H	lave Complete Street Address)
rioject Imerimation (riascri	nave complete street / Idai ess)
Project Name:	
Project Address:	
Contractor Information: (Con	mnany Applying For Permit)
Contractor Information: (Con	riparry Applying For Fermicy
Contractor Name:	Telephone: ()
Billing Address:	Email Address:
City:	
NC State License #	

The undersigned makes application for permits and inspections of work described above and agrees to comply with all applicable state and local codes and laws regarding the work. All fees are in accordance to the current fee schedule based on work described.

Double fees will be charged if work is started prior to obtaining a permit.

Applicant Name (Printed)	Date		
Applicant Signature			
Payment: In Person- (Monday-Friday, 8 am to 3:30 pm)) 304 S Morgan Street Room 152		
Roxboro, NC By Mail- Person County Fire Marshal's Office 304 S Morgan Street Roxboro, NC 27573 Payment required for permit to be valid (cash or check only). Return this form with payment.			
Department Use Only:			
Permit Fees:			
Plan Review - \$ Inspections	- \$ Total - \$		
Permit #			