

## PERSON COUNTY INSPECTIONS DEPARTMENT

\*\*\*BUILDING PERMIT APPLICATION\*\*\*

325 S. Morgan St. Suite A, Roxboro, NC 27573 Phone: (336) 597-0570 Fax: (336)598-6838

## Email application to: Inspections@personcountync.gov

**To submit:** All contractors' information & signatures must be completed.

Contractor Name	License #	Phone #	Signature:
Building			
Electrical			
Plumbing			
Mechanical			
Please provide all contractors en	mail addresses bel	<u>ow:</u>	
Building:@	E	Electrical:	
Plumbing:@	M	echanical:	@
Work to be permitted: (Check all tha	t apply) ( ) Residenti	al ( ) Non-Residen	tial () Other
<u>Dimensions:</u> Width:Length: _		g. Area: iclude total heated & r	
( ) House s.f. ( ) Basement _ ( ) Garage s.f (Is it finished/u ( ) Accessory Building – Is it on bloc ( ) Addition s.f. ( ) Mobile Hom ( )Other:	infinished) ( )Pool _ ks ( ) or on slab ( )? ne (list model, year, a	size ( ) Duplex nd sq. ft.)	s.f.
Type of construction: (Check all ( ) Wood Frame ( ) Log Construction ( ) Other (specify)	on () Metal Frame	() Masonry () Slab	Foundation
Total number of rooms (to be added)	<u>:</u> # of bedroon	ns:# of bathro	ooms
Any plumbing fixtures added or char	nged? If so, #		
Any heating or cooling sources l If so- ( ) Gas ( ) Natural Gas ( ) LP			
Type of electrical system: ( ) 100 ( ) Adding additional electrical fixtual ( )Service change from amps to	res and/or outlets ( )	Extend existing wiring	$\mathbf{g}$
Is this overhead ( ) or underground?	( )		

Is a temporary service pole needed (saw service)? ( ) Yes ( ) No Can this inspection be combined with another inspection(example:footing) ( )Yes ( )No **If not combined, a separate \$75.00 fee will be added to your permit total.**
Power Company: ( ) Piedmont Electric or ( ) Duke Progress Energy Premise ID# (10 digit number)
Residential Jobs Only: Estimated Cost of Construction \$
Lien Agent Entry #(Please provide a copy of Appointment of Lien Agent)  If you have any questions, please refer to www.LiensNC.com.
Non - Residential Jobs: (Cost breakdown per trade )  Building: \$ Electrical: \$  Mechanical: \$ Plumbing: \$  Sprinkler: \$ Other: \$  Total Job Cost: \$  Proof of Workman's Compensation Insurance (must accompany application if applicable)  The undersigned hereby makes application as designed above, and agrees to conform to all applicable laws of Person County and the State of North Carolina, and that the structure designated above is not to be occupied or used until a certificate of occupancy is issued by the Person County Inspections Dept. The undersigned further states that all statements made herein are true.  Applicant's Printed Name: Date:  You are required to report this work when ready for inspection. We require a 24hr. notice.
For Department Use Only:  Building Permit Fee:\$ Homeowner's Recovery Fund Y / N  (if yes, add \$10.00)
Plan Approved by: Date: