

**DEVELOPMENT SERVICES  
DEPARTMENT**

9 South Main St. Suite 110  
Waynesville, NC. 28786  
Phone: 828-456-8647 Fax: 828-452-1492

OFFICE USE ONLY	
PIN NUMBER:	_____
_____ WIND ZONE	_____ FLOOD ZONE
LAND DISTURBING PERMIT:	_____
Driveway Permit	_____
HOR:	_____
Total permit fee: \$	_____

**RESIDENTIAL BUILDING PERMIT APPLICATION**

PLEASE PRINT CLEARLY	Property Address / Number & Street	City/ Zip	
	NAME	MAILING ADDRESS-NUMBER,STREET,CITY & ZIP	PHONE NUMBER
APPLICANT	Last		
	First		
PROPERTY OWNER	Last		
	First		
GENERAL CONTRACTOR	Company		
	License #		
ELECTRICAL CONTRACTOR	Company		
	License #		
PLUMBING CONTRACTOR	Company		
	License #		
MECHANICAL CONTRACTOR	Company		
	License #		
GAS LINE	Company		
	License #		

**PROVIDE INFORMATION REQUESTED-INCOMPLETE APPLICATION CANNOT BE PROCESSED**

TYPE OF WORK	TYPE OF CONSTRUCTION	TYPE OF USE
<input type="checkbox"/> New Building <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Describe Nature of Work _____ _____ <b>Building Areas</b> Area Under Construction _____ sq.ft Heated Area _____ sq.ft. Unheated Area _____ sq.ft. Stories Above Grade _____ Stories Below Grade _____ Number of Bedroom _____ Covered Decks _____ sq.ft. Uncovered Decks _____ sq.ft.	<input type="checkbox"/> Site Built <input type="checkbox"/> Wood Frame <input type="checkbox"/> Steel Frame <input type="checkbox"/> Log <input type="checkbox"/> Size of Logs _____ <input type="checkbox"/> Modular <input type="checkbox"/> Mod. Validating Stamp# _____  <b>Type of Foundation</b> <input type="checkbox"/> Crawl space <input type="checkbox"/> Basement <input type="checkbox"/> Slab <input type="checkbox"/> Describe other _____	<input type="checkbox"/> Single Family Dwelling <input type="checkbox"/> Two Family Dwelling. Duplex <input type="checkbox"/> Rental Property <input type="checkbox"/> Garage <input type="checkbox"/> Carport <input type="checkbox"/> Storage Building <input type="checkbox"/> Swimming Pool <input type="checkbox"/> Describe other _____ _____  <b>**Required**</b> <b>COST OF PROJECT</b> _____

I hereby certify that I have the authority to make the foregoing application, that the application is correct, and that the construction shall conform to the regulations in the North Carolina Building Code and all other codes and regulation or private building restrictions, if any, which may be imposed on the above property by deed.

Signature

Address

## LIEN AGENT INFORMATION

Effective April 1, 2013

In accordance with North Carolina General Assembly Session Law 2012-158, Inspection Departments are not allowed to issue any permit where the project cost is \$30,000 or more unless the application is for improvements to an existing dwelling that the applicant uses as a residence OR the property owner has designated a lien agent and provided the inspections office with the information below:

Name of Lien Agent \_\_\_\_\_

Mailing address of Agent \_\_\_\_\_

\_\_\_\_\_

Physical address of Agent \_\_\_\_\_

\_\_\_\_\_

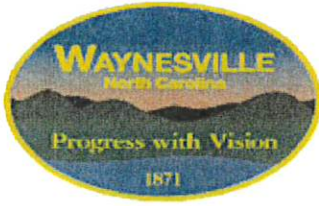
Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

The information will be attached to the permit record and a copy provided to the applicant. The applicant is required to post a copy on the construction site.

Excerpt from North Carolina G.S. 160A-417:

“(Effective April 1, 2013) No permit shall be issued pursuant to subdivision (1) of subsection (a) of this section where the cost of the work is thirty thousand dollars (\$30,000) or more, other than for improvements to an existing single-family residential dwelling unit as defined in G.S. 87-15.5(7) that the applicant uses as a residence, unless the name, physical and mailing address, telephone number, facsimile number, and electronic mail address of the lien agent designated by the owner pursuant to G.S. 44A-11.1(a) is conspicuously set forth in the permit or in an attachment thereto. The building permit may contain the lien agent's electronic mail address. The lien agent information for each permit issued pursuant to this subsection shall be maintained by the inspection department in the same manner and in the same location in which it maintains its record of building permits issued.”



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**AFFIDAVIT AS TO STATUS OF LICENSURE N.C.G.S. § 87-1**

To Permit Applicant: Please check the appropriate lines, provide the requested information, and sign and date below.

- I propose to construct a new building.
- I propose to set-up a properly labeled modular building.
- I am a North Carolina licensed general contractor. My license number is \_\_\_\_\_.
- I am not a North Carolina licensed general contractor. The cost of the project I am entering into does not exceed \$30,000.00 per N.C.G.S. § 87-1.
- I am not a North Carolina licensed general contractor. I am providing to the local inspection jurisdiction a \$5,000 surety bond in accordance with N.C.G.S. § 143-139.1. (Modular set-up only)
- I am the owner of the proposed building. It is my intention to act as my own general contractor for constructing the proposed building or for setting up the proposed modular building. I have entered into a construction project where the cost of the undertaking exceeds \$30,000; I have read G.S. Section § 87-1. I certify that I am not allowing an unlicensed general contractor to perform the duties of a general contractor, which, I understand from reading G.S. Section § 87-1 include construction superintending and managing in addition to, among other things, signing written contracts. I intend to retain the finished house (or other project) exclusively for my own use, and to be occupied by me or my family for a minimum of one year after completion. I am not building a "speculation" project with the intention of selling the project once it is completed. I understand that building a "spec" project without proper licensure is a violation of G.S. § 87-13; this may be a criminal offense. Also, I understand that problems which may arise due to construction of the building or set-up of the properly labeled modular building, such as inaccurate or insufficient foundation, improper or inadequate marriage line connections, improper plumbing, mechanical, or electrical connections between the units, etc., will be solely my responsibility, and I will be left with no recourse and must assume total liability for correction of the problems. I personally have a thorough knowledge of the requirements of the NC State Building Code with regard to construction and/or setting up modular buildings.

\_\_\_\_\_  
Signature of Permit Applicant

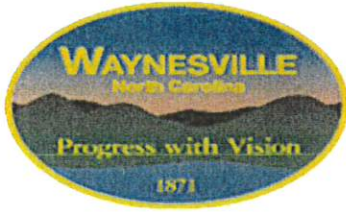
\_\_\_\_\_  
Date

Official Seal Notary Public

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Signature of Notary

\_\_\_\_\_  
My commission expires



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**AFFIDAVIT OF WORKERS' COMPENSATION COVERAGE**  
**N.C.G.S. 87-14**

The undersigned applicant for Building Permit # \_\_\_\_\_ being the

Contractor  Owner  Officer/Agent of the Contract or Owner do hereby aver under penalties of perjury that the person(s), firm(s), or corporation(s) performing the work set forth in the permit:

has/have three (3) or more employees and have obtained workers' compensation insurance to cover them,

has/have one or more subcontractor(s) and have obtained workers' compensation insurance covering them,

has/have one or more subcontractor(s) who has/have their own policy of workers' compensation covering themselves,

has/have not more than (2) employees and no subcontractors,

while working on the project for which this permit is sought. It is understood that the Inspection Department issuing the permit may require certification of coverage of workers' compensation insurance prior to issuance of the permit and at any time during the permitting work from any person, firm or corporation carrying out the work.

Company Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Official Seal Notary Public

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF NOTARY

\_\_\_\_\_  
MY COMMISSION EXPIRES