



This document is effective December 1, 2009
All previous versions are expired

TOWN OF HOLDEN BEACH

BUILDING PERMIT APPLICATION

Office Only:

** All information on this application must be filled out completely. Information that does not apply must show n/a. Incomplete applications shall be returned without being processed.*

A zoning permit application must be submitted prior to or at the same time as the application.

PROPERTY OWNER INFORMATION:
Name: _____
Holden Beach Property Address: _____
Lot Number: _____ Subdivision: _____
Permanent Mailing Address:
Street Address: _____
City/State/Zip: _____
Home Phone: _____ Beach House Phone: _____
Cellular Phone: _____ Fax: _____
Email: _____

CONTRACTOR INFORMATION:
Business Name: _____ Qualifier: _____
Mailing Address:
Street Address: _____
City/State/Zip: _____
Phone: _____ Cellular Phone: _____
Fax: _____ Email: _____
N.C. State Contractor's License Number: _____
Workman's Compensation Number (Attach Copy): _____
Current Holden Beach Privilege License Number Yes _____ No _____
Contact Person: _____
Phone: _____ Cellular Phone: _____
Fax: _____ Email: _____

ZONING: (check one)
Residential (R-1 Zone) _____ Residential (R-2 Zone) _____ Commercial (C-1 Zone) _____

FLOOD PLAIN INFORMATION:
Flood Zone Designation (X, AE, VE) _____ Base Flood Elevation _____

WORK CLASSIFICATION AND VALUE: (check one)
New _____ Addition _____ Repair _____
\$ _____ \$ _____ \$ _____
List all repairs in detail on second page.

PROPERTY USE: (check one)
Single Family _____ Two Family _____ Condominium _____ Townhouse _____

Commercial _____ Other _____ Description _____

ACCESSORY CONSTRUCTION: (check one)

Boatlift ____ Dock ____ Bulkhead ____ Specify Use: _____ Value: _____
Driveway _____ Square Feet _____ Specify type of material used for driveway _____

SUPPLEMENTAL INFORMATION: (for proposed work only)

Ground Level
Open Concrete Area Under Home: _____ sf
Enclosed Unheated: _____ sf
Enclosed Heated: _____ sf

Floor 1
Enclosed Heated: _____ sf
Enclosed Unheated: _____ sf
Open Deck: _____ sf
Covered Deck: _____ sf

Floor 2
Enclosed Heated: _____ sf
Enclosed Unheated: _____ sf
Open Deck: _____ sf
Covered Deck: _____ sf

NUMBER OF:

Bedrooms _____

Baths _____

Kitchens _____

CAMA INFORMATION:

Has a minor CAMA permit been issued: yes _____ no _____ If yes, permit number _____
If no, has a CAMA exemption been issued: yes _____ no _____

DESCRIPTION OF PROPOSED WORK: (add additional sheets as necessary)

[Area for description of proposed work with horizontal lines for text entry]

Subcontractors must be listed Here:

Electrician _____ license# _____ Phone: _____
Address: _____

Signature _____

Mechanical _____ License# _____ Phone: _____
Address: _____

Signature _____

Plumbing _____ License _____ Phone: _____
Address: _____

Signature _____

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 a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

This permit becomes null and void if work or construction authorized is not commenced within six months, or if construction or work is suspended or abandoned for a period of one year at any time after work is commenced.

Owner/Agent Signature

Date

Printed Name

PERMIT APPROVAL:

Building Inspector

Date

APPENDIX D

AFFIDAVIT OF WORKER'S COMPENSTATION COVERAGE
N.C.G.S §87-14

The undersigned applicant for construction on Parcel # _____ being the

_____ Contractor

_____ Owner

_____ Officer/Agent of the Contractor

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 worker's compensation insurance to cover them,

_____ has/have one or more subcontractor(s) and have obtained worker's compensation insurance to cover them,

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

_____ has/have not more than two (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 certificates of coverage of Worker's Compensation insurance prior to issuance of the permit at any time during the permitted work from any person, firm or corporation carrying out the work.

Company Name : _____

Signed : _____

Print : _____

Title : _____

Date: _____

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.”