

APPLICATION FOR BUILDING PERMIT

TYPE PERMIT <input type="checkbox"/> Single Family <input type="checkbox"/> Two Family <input type="checkbox"/> Commercial <input type="checkbox"/> Mobile Home <input type="checkbox"/> Modular		PERMIT #																								
ADDRESS	STREET # (N,S,E,W) STREET NAME (AV, RD, ST, etc)																									
	SUITE/UNIT(S): _____																									
	TAX JURISDICTION: <input type="checkbox"/> 0-Mecklenburg <input type="checkbox"/> 1-Charlotte <input type="checkbox"/> 2-Davidson <input type="checkbox"/> 3-Cornelius (Check One) <input type="checkbox"/> 4-Pineville <input type="checkbox"/> 5-Matthews <input type="checkbox"/> 6-Huntersville <input type="checkbox"/> 7-Mint Hill																									
SITE DATA	PROJECT/SUBDIVISION NAME _____ PHASE _____ SECTION _____ PROJECT #																									
	OWNER _____ ADDRESS _____																									
	CITY _____ STATE _____ ZIP _____ PHONE # _____																									
	<div style="border: 1px solid black; padding: 2px;">TAX PARCEL #</div> <div style="border: 1px solid black; padding: 2px;">CENSUS</div>																									
	LOT # _____ BLOCK # _____ LAND AREA (sq. ft.) _____																									
	ZONING _____ JURIS _____ MAP # _____ R/W _____ SPECIAL (Circle) C D N P S FLOOD PLAIN <input type="checkbox"/> Yes FLOOD ELEV _____ FIRE DIST. <input type="checkbox"/> Yes APR'D _____ LOT <input type="checkbox"/> CORNER <input type="checkbox"/> THROUGH FRONT SHEET (if different) _____ MINIMUM SETBACKS: FRONT _____ LEFT SIDE _____ RIGHT SIDE _____ REAR _____ REQ. PARK'G _____																									
PROJECT	JOB # _____ TYPE WORK: <input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Accessory <input type="checkbox"/> Upfit <input type="checkbox"/> Shelf <input type="checkbox"/> Demolish <input type="checkbox"/> Other																									
	USDC # _____ PROJECT DESCRIPTION (Residence, Office, etc.) Mobile Home: include Yr./Make & Serial #																									
	PURPOSE _____ AREA (sq. ft.): Heated _____ Unheated _____ Deck(s) _____ # STORIES _____ BASEMENT <input type="checkbox"/> Yes																									
	OCC. TYPE _____ ONE/TWO FAMILY, MODULAR, OR MOBILE HOME: TOTAL # ROOMS _____ # BEDROOMS _____ # BATHS _____ Work includes: <input type="checkbox"/> Attached Carport <input type="checkbox"/> Attached Garage <input type="checkbox"/> Masonry Fireplace(s)																									
	CONST _____ SPRINKLERS <input type="checkbox"/> Yes # UNITS _____ MULTI-FAMILY: # HANDICAP UNITS _____																									
SERVICES	ELECTRICAL Power Company _____ Service: <input type="checkbox"/> New <input type="checkbox"/> Existing Total Amps _____ # Circuits _____ # Connections 120 Volts _____ # Connections over 120 Volts _____																									
	MECHANICAL: Gas Company _____ # Gas Conn _____ # Appliances _____ <input type="checkbox"/> Heat Only <input type="checkbox"/> Central A/C Only <input type="checkbox"/> Heat and A/C <input type="checkbox"/> 1-Heat Pump <input type="checkbox"/> 2-Central A/C <input type="checkbox"/> 3-Elect. Baseboard <input type="checkbox"/> 4-Elect. Furnace <input type="checkbox"/> 5-Elect. Ceiling <input type="checkbox"/> 6-Gas/Oil Furnace <input type="checkbox"/> 7-Gas/Oil Steam <input type="checkbox"/> 8-Gas Pack <input type="checkbox"/> 9-Pre-Fab Fireplace <input type="checkbox"/> 10-Chimney <input type="checkbox"/> 11-Stove																									
	PLUMBING: # of Fixtures (Sink, Water Closet, etc.) _____ # of Appliances (Dishwasher, Water Heater, etc.) _____																									
	UTILITIES: <input type="checkbox"/> New <input type="checkbox"/> Existing Public 1-Individual Meter/Connection <input type="checkbox"/> Water <input type="checkbox"/> Sewer Private 3-Individual <input type="checkbox"/> Well <input type="checkbox"/> Septic 2-Master Meter/Connection <input type="checkbox"/> Water <input type="checkbox"/> Sewer 4-Community <input type="checkbox"/> Well <input type="checkbox"/> Septic																									
	CONTRACTORS <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">ACCT #</th> <th style="width: 60%;">CONTRACTOR(S): (Name/Address as appears on license)</th> <th style="width: 15%;">CONTRACT COST Nearest \$100</th> <th style="width: 15%;">APR'D FEES \$</th> </tr> </thead> <tbody> <tr> <td></td> <td>Bldg _____ Phone _____ Lic # _____ Add _____ City/St _____ Zip _____</td> <td>Bldg \$ _____</td> <td></td> </tr> <tr> <td></td> <td>Elect _____ Phone _____ Lic # _____ Add _____ City/St _____ Zip _____</td> <td>Elect. \$ _____</td> <td></td> </tr> <tr> <td></td> <td>Mech _____ Phone _____ Lic # _____ Add _____ City/St _____ Zip _____</td> <td>Mech. \$ _____</td> <td></td> </tr> <tr> <td></td> <td>Plbg _____ Phone _____ Lic # _____ Add _____ City/St _____ Zip _____</td> <td>Plbg. \$ _____</td> <td></td> </tr> <tr> <td>PLANS <input type="checkbox"/></td> <td>Arch./Eng _____ Phone _____ Lic # _____ Add _____ City/St _____ Zip _____</td> <td>Total Const. Cost \$ _____</td> <td></td> </tr> </tbody> </table>			ACCT #	CONTRACTOR(S): (Name/Address as appears on license)	CONTRACT COST Nearest \$100	APR'D FEES \$		Bldg _____ Phone _____ Lic # _____ Add _____ City/St _____ Zip _____	Bldg \$ _____			Elect _____ Phone _____ Lic # _____ Add _____ City/St _____ Zip _____	Elect. \$ _____			Mech _____ Phone _____ Lic # _____ Add _____ City/St _____ Zip _____	Mech. \$ _____			Plbg _____ Phone _____ Lic # _____ Add _____ City/St _____ Zip _____	Plbg. \$ _____		PLANS <input type="checkbox"/>	Arch./Eng _____ Phone _____ Lic # _____ Add _____ City/St _____ Zip _____	Total Const. Cost \$ _____
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OTHER	FT <input type="checkbox"/> TOTAL ESTIMATED PROJECT COST FOR FAST TRACK OR MODULAR \$ _____																									
	REMARKS: _____																									
	<div style="border: 1px solid black; padding: 2px;">TOTAL FEE \$</div>																									

THE UNDERSIGNED HEREBY CERTIFIES THAT HE/SHE IS EITHER THE OWNER OR THE AUTHORIZED AGENT OF THE OWNER AND HEREBY MAKES APPLICATION FOR PERMIT AND INSPECTION OF WORK DESCRIBED AND AGREES TO COMPLY WITH ALL APPLICABLE LAWS REGULATING THE WORK.

APPLICANT'S SIGNATURE _____ DATE _____ PRINT APPLICANT'S NAME _____ METHOD OF PAYMENT ☐ CASH/CHECK ☐ ACCOUNT

MECKLENBURG COUNTY LAND USE AND ENVIRONMENTAL SERVICES AGENCY
 700 N. TRYON STREET • CHARLOTTE, NC 28202 • 704/336-2831

HOLDS	PROCESSED BY	APPROVED BY	VALIDATED BY

ORIGINAL