

# APPLICATION FOR BUILDING PERMIT IN TOWN OF GARNER

Sub-Contractors must complete a separate application.

1. TWO SETS OF PLANS MAYBE REQUIRED WITH THIS APPLICATION. THE INSPECTIONS DEPARTMENT WILL DETERMINE AT SUBMITTAL.
2. A PLOT PLAN OR APPROVED SITE / CUP IS REQUIRED SHOWING SETBACKS OF THE STRUCTURE TO THE PROPERTY LINE
3. PLEASE COMPLETE ITEMS THAT ARE APPLICABLE TO YOUR PROJECT AND FOR WHICH YOU HAVE VALID INFORMATION. ITEMS LEFT BLANK OR THAT ARE INCORRECT NEEDED TO COMPLETE YOUR APPLICATION, WILL BE VERIFIED BY THE INSPECTIONS DEPARTMENT AND ENTERED ON THE APPLICATION. ANY ADDITIONAL INFORMATION ADDED OR ITEMS CORRECTED WILL BE TRANSFERRED TO THE PERMIT FORM FOR YOUR SIGNATURE.

<b>OWNER/TENANT:</b> NAME _____ ADDRESS _____
CITY _____ STATE _____ ZIP _____ TEL: _____

<b>LOCATION:</b> STREET NUMBER _____ STREET NAME _____
LOT _____ BLOCK _____ SUBDIVISION _____

<b>CONTRACTOR:</b> NAME _____ ADDRESS _____
CITY _____ STATE _____ ZIP _____ NC STATE LICENSE # _____
CONTACT PERSON _____
TEL: _____ FAX: _____

<b>PLAN DESIGNER:</b> DESIGN _____ ADDRESS _____
CITY _____ STATE _____ ZIP _____ TEL: _____

<b>WORK DESCRIPTION:</b> DESCRIBE WORK ASSOCIATED WITH THIS APPLICATION _____
Type of Building: New _____ Addition _____ Alteration/Repair _____ Proposed use: Single Family _____ Office/Business _____
Mercantile/Retail _____ Assembly _____ Industrial/Factory _____ Educational/School _____ Storage/Warehouse _____
Apartment/Condos _____ Other _____ Water/Sewer: Public _____ Well/Septic _____ (Wake County approval required)
Description: _____

<b>COST DATA:</b> THIS INFORMATION IS FOR VERIFYING LICENSE REQUIREMENTS. THE CATEGORIES WILL NOT NECESSARILY EQUAL THE AMOUNT IN TOTAL COST!
BUILDING: _____ ELECTRICAL: _____ PLUMBING: _____
MECHANICAL: _____ TOTAL COST: _____
(TOTAL COST MAY INCLUDE OTHER CONSTRUCTION COSTS NOT LISTED IN PREVIOUS CATEGORIES.)

<b>DIMENSIONS OF STRUCTURE:</b> NUMBER OF STORIES _____ HEATED AREA _____
GARAGE AREA _____ TOTAL AREA _____
Number of Bedrooms _____ Bathrooms _____

<b>SIGNATURE OF OWNER/TENANT/AGENT:</b>
SIGNATURE: _____ DATE: _____

DO NOT WRITE IN THIS SPACE BELOW: OFFICE USE ONLY!

<b>PLANNING DEPARTMENT:</b>
INSIDE: YES / NO CENSUS: _____ ZONING: _____ PIN#: _____
APPROVED BY: _____ DATE: _____
COMMENTS: _____
<b>INSPECTIONS DEPARTMENT:</b>
APPROVED BY: _____ DATE: _____ LEVEL: _____
COMMENTS: _____