

**RESIDENTIAL RENOVATION**  
**REMODEL OF EXISTING SPACE NO EXTERIOR GROUND WORK**  
**BUNCOMBE COUNTY PERMIT APPLICATION**

Site Location: \_\_\_\_\_ PIN # \_\_\_\_\_

Directions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Circle Permit Type: Single Family    Townhouse    Duplex    Modular Home    Other \_\_\_\_\_

Type of Work: Renovation    **Licensed Daycare:** Yes No    **Re-Roof Only:** Yes No    **Window Replacement Only:** Yes No

Use of Property: (Circle One) Owner Occupied    Rental    Sale    **Project Description:** \_\_\_\_\_

Total Cost of Project: \$ \_\_\_\_\_ **RENOVATED HEATED SQUARE FEET:** \_\_\_\_\_

**EXISTING:** # of Stories \_\_\_\_\_ # of Bedrooms \_\_\_\_\_ # of Bathrooms \_\_\_\_\_ Heated Sq. Ft. \_\_\_\_\_ Unheated Sq. Ft. \_\_\_\_\_ Height \_\_\_\_\_

**NEW:** # of Bedrooms \_\_\_\_\_ # of Bathrooms \_\_\_\_\_ Heated Sq. Ft. \_\_\_\_\_ Unheated Sq. Ft. \_\_\_\_\_

**EXISTING:** Basement Heated Sq. Ft. \_\_\_\_\_ Basement Unheated Sq. Ft. \_\_\_\_\_

**NEW:** Basement Heated Sq. Ft. \_\_\_\_\_ Basement Unheated Sq. Ft. \_\_\_\_\_

**TOTAL # BEDROOMS** \_\_\_\_\_ **TOTAL # BATHROOMS** \_\_\_\_\_

**TOTAL NEW HEATED SQ. FT.** \_\_\_\_\_ **TOTAL NEW UNHEATED SQ.FT.** \_\_\_\_\_

Deck (replacement of decking, handrails, guards, etc): Yes No Sq. Ft. \_\_\_\_\_ Covered: Yes No

Foundation Type: Basement    Crawlspace    Slab    Piers    Other \_\_\_\_\_

Owner: \_\_\_\_\_ Phone # \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Applicant: \_\_\_\_\_ Phone # \_\_\_\_\_

Applicant email address: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contractor: \_\_\_\_\_ NCGC LIC # \_\_\_\_\_ Phone # \_\_\_\_\_

Sub-Contractors: Electrical \_\_\_\_\_ State Lic # \_\_\_\_\_

Mechanical \_\_\_\_\_ State Lic # \_\_\_\_\_

Plumbing \_\_\_\_\_ State Lic # \_\_\_\_\_

Fuel Piping \_\_\_\_\_ State Lic # \_\_\_\_\_

Other \_\_\_\_\_ State Lic # \_\_\_\_\_

Lien Agent: \_\_\_\_\_

**UTILITIES: CIRCLE APPLICABLE TYPE(S)**

**ELECTRIC:**    **DUKE ENERGY**    **DUKE PROGRESS**    **HAYWOOD EMC**    **FRENCH BROAD EMC**

**HEAT SOURCE:**    **NATURAL GAS**    **LP GAS**    **OIL**    **ELECTRIC**    **HEAT PUMP**

**WATER:**    **NEW / EXISTING**    **PRIVATE WELL**    **COMMUNITY WELL**    **PUBLIC WATER**    **OTHER** \_\_\_\_\_

**SEWER:**    **NEW / EXISTING**    **SEPTIC**    **MSD SEWER**    **OTHER** \_\_\_\_\_

The undersigned hereby certifies that he/she is the contractor and authorized agent of the owner and the above information is correct to the best of his/her knowledge and hereby makes application for a permit and inspection of work described above. All work will be done in accordance with all applicable Federal, State and local laws and regulations and that it is understood that this permit will expire if work is not commenced and inspected within six months of the date of issue. This permit will also expire if work stops at any time for 12 months or more and no inspections are performed to verify work in progress.

Applicant Signature

Date

Printed Name