CASE # _____

BUNCOMBE COUNTY PERMIT APPLICATION

Site Location: _____ PIN # _____

Township: _____ Subdivision/Park Name: _____ Lot # _____ Ridge Law: _____

Directions:_____
_____
_____

Circle Permit Type: Single Family Townhouse Duplex Mobile Home Modular Home Commercial Multi-Family Other_____

Type of Work: Circle Applicable Type(s) New Addition Remodel Upfit/Repair Change of Use Moved House Garage (Att / Det) SQ. FT. _____
Use of Property: (Circle One) Owner Occupied Rental Sale
Project Description: _____
Total Cost of Project: _____# of Stories_____ # of Bedrooms_____# of Bathrooms_____
Total Heated SQ. FT._____ SQ. FT. of New Construction (or Renovated Area) _____

Foundation – Circle Applicable Type: Basement Crawlspace Slab Piers Other_____

Basement Finished: Yes / No Total Heated SQ. FT. of Basement_____ Total Unheated. SQ. FT. of Basement_____

Mobile Homes Only: Year_____Manufacturer_____Size_____Electric Furnace – Yes / No
Mobile Home Dealer: _____ Phone #_____
Address: _____ City_____State_____ Zip_____
Set-up Contractor: _____ Phone #_____ Lic #_____
Address: _____ City _____ State_____ Zip_____

Owner: _____Phone # _____

Address: _____City_____ State _____ Zip_____

Applicant (If Different from Owner): _____Phone # _____

Address: _____ City_____State_____Zip_____

Contractor: _____ **NCGC LIC #**_____Phone # _____

Address: _____City_____State_____ Zip_____

Lien Agent Name:_____ Phone #_____

Address :_____ City_____ State_____Zip_____

Sub-Contractors: Electrical _____ State Lic # _____

Mechanical_____ State Lic # _____

Plumbing _____ State Lic # _____

Sprinkler _____ State Lic #_____

Other _____ State Lic # _____

Utilities – Circle Applicable Type(s)

Electric: Duke Progress Energy Duke Power French Broad EMC Haywood EMC Other _____

Fossil Fuel: Natural Gas LP Gas Oil Heat Pump/AC Other_____

Water: Private Well (New) or (Existing) Community Well Public Water

Sewer: Septic Tank (New) Septic Tank (Existing) 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.

_____ _____ _____
Contractor / Owner Signature Date Printed Name

OFFICE USE ONLY: Zoning Approval - _____Asheville ETJ _____Beaverdam_____ Biltmore Forest_____ Limestone_____Weaverville_____ Woodfin

Flood Hazard Zone: _____ FIRM # _____ Grading/Erosion Permit # _____ Lot Size_____Disturbed Area_____ Watershed_____