

SPR # \_\_\_\_\_

CASE # \_\_\_\_\_

**RESIDENTIAL**  
**BUNCOMBE COUNTY PERMIT APPLICATION**

Site Location: \_\_\_\_\_

PIN # \_\_\_\_\_

Subdivision Name: \_\_\_\_\_ Lot # \_\_\_\_\_

Ridge Law \_\_\_\_\_

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

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

Type of Work:      New      Addition      Alteration      Moved House      Garage      Solar: (Circle One) Roof / Ground

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

Total Cost of Project: \$ \_\_\_\_\_ # of Stories \_\_\_\_\_ Height \_\_\_\_\_ # of Bedrooms \_\_\_\_\_ # Bathrooms \_\_\_\_\_

Sq. Ft. of New Construction/Altered \_\_\_\_\_ Existing Sq. Ft. \_\_\_\_\_

Sq. Ft. of New/Altered Heated Sq. Ft \_\_\_\_\_ Sq. Ft. Existing Heated \_\_\_\_\_

Basement Heated Sq. Ft. \_\_\_\_\_ Basement Unheated Sq. Ft. \_\_\_\_\_

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

Garage (Attached / Detached): Sq. Ft. \_\_\_\_\_

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

Sprinkler \_\_\_\_\_ State Lic # \_\_\_\_\_

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

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

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

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

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

**HEAT SOURCE:**      ELECTRIC      HEAT PUMP      LP GAS      NATURAL GAS      OIL      OTHER \_\_\_\_\_

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

**SEWER:**      NEW      EXISTING      SEPTIC      MSD      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

## INFORMAL REVIEW OF INSPECTION RESULT

Per North Carolina General Statute 143-140. *Any person desiring to raise any question under this Article or under the North Carolina State Building Code shall be entitled to a technical interpretation from the appropriate enforcement agency, as designated in the preceding section. Upon request in writing by any such person, the enforcement agency through an appropriate official shall within a reasonable time provide a written interpretation, setting forth the facts found, the decision reached, and the reasons therefor. In the event of dissatisfaction with such decision, the person affected shall have the options of:*

*(1) Appealing to the Building Code Council or*

*(2) Appealing directly to the Superior Court as provided in G.S. 143-141.*

*(b) If an interpretation under this section or under G.S. 143-141(b) changes after a building permit is issued, the permit applicant may choose which version of the interpretation will apply to the permit, unless such a choice would cause harm to life or property.*

In the event you as the applicant of the permit desire for an interpretation of an inspection result from the inspector from a decision based upon the North Carolina State Building Codes visit our website for the form entitled **INFORMAL INTERNAL REVIEW PROCESS FORM**. The form needs to be completed and any supporting documents attached, incomplete forms will not be processed. Once the form is completed you may deliver to the Buncombe County Permits & Inspections Office attention to: Inspections Supervisor: Bob Haynes 828-250-5360 or bob.haynes@buncombecounty.org

I have read and understand my right to appeal the inspection result of a North Carolina State Building Code decision based upon the decision of the field inspector. I also understand that incomplete forms will not be processed and this is a review of a code interpretation and NOT a complaint.