

Cabarrus County Construction Standards Codes Enforcement Building and Trade Permit Application for Single Family Home

I hereby certify that all information in this application is correct, and all work will comply with the State Building Code and all other applicable State and local laws, ordinances, and regulations. The Cabarrus County Construction Standards Code Enforcement office must be notified of any changes to approved plans and specifications for the project permitted herein. **The Cabarrus County Construction Standards Code Enforcement Office may request contract validation at any time. I understand that I must provide the information and/or documents requested to avoid revocation of the permits. By signing the application, I am agreeing to comply. Per § 87-14. Regulations as to issue of building permits.**

SINGLE FAMILY REPEAT *Must provide previously approved Plan Review number (2020 and newer)* _____

SINGLE FAMILY CUSTOM SINGLE FAMILY DUPLEX SINGLE FAMILY MODULAR

SINGLE FAMILY TOWNHOME

The applicant is the person responsible for the work being complete, all inspections, and building permit will be put in applicant's name.

APPLICANT (PRINT CLEARLY): _____

Applicant is Homeowner

Forms: Owner Affidavit owner MUST live in the home after work is complete
Lien (www.liensnc.com) required for projects \$30,000 or more

NC GC License. # _____

Form: Lien (www.liensnc.com) required for projects \$30,000 or more

EMAIL: _____ CELL #: _____

PROJECT ADDRESS: _____ UNIT/SUITE/BLDG/LOT _____

BUILDING PERMIT

Signature of Building Applicant: _____

DETAILED SCOPE OF WORK: _____

JURISDICTION _____ BLDG ESTIMATED COST: \$ _____

TYPE OF HEAT: ELECTRIC GAS BOTH GAS AND ELECTRIC PREFAB FIREPLACE # of Fireplaces _____

SQUARE FT: HEATED _____ UNHEATED _____ TOTAL SQ FT: _____ ZONING #: _____

STORIES: _____ HABITABLE ROOMS: _____ BEDROOMS: _____ BATHROOMS: _____

This property on SEPTIC. SEPTIC NUMBER: _____ BASEMENT: FINISHED UNFINISHED

This property on CITY WATER CITY SEWER CITY WATER AND SEWER WATER COMPANY: _____

TOTAL ESTIMATED COST INCLUDING BUILDING AND TRADES: \$ _____

Our permits are blanketed, and each section of the application must be filled in to completely reflect the scope of work for the new single-family residence and include the licensed contractor's or a bonafide employee of the company's signature. All permits, excluding the Temporary Power permit, are included in the payment. Temporary power is available for an **additional fee** and is used to energize part of the panel.

ELECTRIC PERMIT

Signature of Electrical Applicant: _____

Applicant (PRINT CLEARLY): _____ Applicant is Homeowner

Email: _____ Cell #: _____ NC EL License # _____

DETAILED SCOPE OF WORK: _____

POWER COMPANY (required) _____ NEW SERVICE AMPERAGE _____

SAW POLE SERVICE (temporary to power tools for construction) This service is included on the electric permit.

TEMPORARY POWER (temporary to check equipment, acclimate floors or cabinets, etc.) Temporary power is available for an additional fee and is used to energize part of the panel. Additional permit and fee are required. *\$61.71 at time of permitting, \$131.69 after permits have been issued* - THIS IS NOT FOR SAW SERVICE OR PERMANENT POWER.

What will be powered? (REQUIRED) List unit or suite if applicable: _____

ELECTRIC ESTIMATED COST: \$ _____

MECHANICAL PERMIT

Signature of Mechanical Applicant: _____

Applicant (PRINT CLEARLY): _____ Applicant is Homeowner

Email: _____ Cell #: _____ NC HE License # _____

DETAILED SCOPE OF WORK: _____

GAS COMPANY (required) _____ TYPE OF HEAT: ELECTRIC GAS ELECTRIC AND GAS

NUMBER OF GAS CONNECTIONS: _____

NUMBER OF UNITS: _____ SPLIT UNIT(S) _____ PACKAGE UNIT(S) _____ GAS PAC UNIT(S) _____ MINI SPLIT(S)

MECHANICAL ESTIMATED COST: \$ _____

PLUMBING PERMIT

Signature of Plumbing Applicant: _____

Applicant (PRINT CLEARLY): _____ Applicant is Homeowner

Email: _____ Cell #: _____ NC PL License # _____

DETAILED SCOPE OF WORK: _____

This property on WELL CITY WATER CITY SEWER PRIVATE SEPTIC COMMUNITY SEPTIC COMM. WELL
(CHECK ALL THAT APPLY) EXISTING TAPS ON PROPERTY *(Must provide proof to have WSACC fee waved-Contact utility company or zoning)*

WATER COMPANY (required) _____

NUMBER OF FIXTURES BEING INSTALLED

___ WATER CLOSET toilets	___ SINK (kitchen, mop, bar, etc.)	___ FLOOR DRAIN(S)
___ LAVATORY bath sinks	___ WASH. MACHINE	___ URNIAL(S)
___ TUB OR TUB/SHOWER	___ *WATER HEATER	___ DISHWASHER
___ SHOWER (only)	___ DISPOSAL	___ FOUNTAIN(S)

*Water heater install or replacement for **gas** requires a mechanical permit with plumbing and an electric at no cost and **electric** requires a plumbing permit with an electric permit at no cost.

PLUMBING ESTIMATED COST: \$ _____

PLUMBING PERMIT FOR RESIDENTIAL FIRE SPRINKLERS

Signature of Plumbing Applicant: _____

Applicant (PRINT CLEARLY): _____

Email: _____ Cell #: _____ NC PL License # _____

FIRE SPRINKLER PLUMBING ESTIMATED COST: \$ _____