Pursuant to Town Code Section 155.03 a building permit application shall be considered abandoned and voided and the permit fee will not be refunded if either (A) 180 days has passed since the date the applicant was notified that the permit was ready for pickup and the permit has not been picked up or (B) 180 days has passed since the permit application was submitted and the applicant has not responded to the building inspector’s requests for modifications or additional information so as to allow final processing and issuance of the permit. Note: this form is not a building permit. No work may commence until the actual permit has been issued. Working without permits may result in additional fees being assessed.

A. Required to be Submitted at Time of Application (check all that apply)

- Failure to provide the info required on this application may delay the review and subsequent issuance of the requested permit.
- Digital copies of all paper submittal documents (may be emailed to planning@townofboone.net)
- 3 bound copies of plans (maximum size 30” x 42”) and 3 Copies of Appendix B for Multi-Family, Mixed-Use, Commercial
- Verification that the applicant has submitted a Water and Sewer System Development Fee Application (for Town water and sewer) or written approval from the Appalachian District Health Department (for well and/or septic). See Section M.
- All applicable Contractor, Exempt Contractor, or Self-Contractor Regulation Sheets.
- Lien Agent. NC law requires appointment of a lien agent. Lien Agent appointments are not required for improvements under $30,000 or to the owner’s existing residence, or for public building projects. Visit www.liensnc.com for more information.
- Property Owner Authorization. If you are not the property owner, you will need to provide documentation of property owner authorization to apply for this permit. You may have the property owner sign this application (Section P) or the property owner can provide a written and signed authorization that clearly states they are authorizing the applicant to submit this application.
- Permit Fee (See Planning & Inspections Fee Schedule)
  Each application is allowed two (2) reviews. The 1st review of the submitted information and a 2nd review if revisions or supplemental information is required based upon the 1st review. Each subsequent review after the 2nd review will be charged at 50% of the original fees charged for the application. These fees shall be paid at the time of resubmittal.

B. Property Information (Project Location)

<table>
<thead>
<tr>
<th>Street Address</th>
<th>Watauga County Parcel Identification Number</th>
</tr>
</thead>
</table>

C. Property Owner Information

<table>
<thead>
<tr>
<th>Name:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Complete Mailing Address (Street, City, Zip):</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Phone Number:</th>
<th>Email Address:</th>
</tr>
</thead>
</table>

D. Applicant Information

<table>
<thead>
<tr>
<th>Name:</th>
<th>Company:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Complete Mailing Address (Street, City, Zip):</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Phone Number:</th>
<th>Email Address:</th>
</tr>
</thead>
</table>

Preferred Method of Contact for Written/Response Documents (select one):

- [ ] Mail
- [ ] Email

E. Project Cost

<table>
<thead>
<tr>
<th>Project Cost:</th>
</tr>
</thead>
</table>

$
F. Detailed Description of Project


G. Building Information

Project Type (select all that apply): ☐ New Construction ☐ Addition ☐ Renovation/Remodel ☐ Change of Occupancy

Total Square Footage: __________________________________________

Number of Stories: Current: ___________ Proposed: ___________

Building Height: Current: ___________ Proposed: ___________

Number of Units: Current: ___________ Proposed: ___________

Number of Bedrooms: Current: ___________ Proposed: ___________

Elevators: ☐ Yes or ☐ No

Sprinkled: ☐ Yes or ☐ No

Type of Construction

See Chapter 6 of the NC Building Code

☐ IA ☐ IB ☐ IIIA ☐ IIA ☐ IIB ☐ IIB

☐ IIIB ☐ IV ☐ VA ☐ VB

Previous Type of Occupancy

See Chapter 3 of the NC Building Code

☐ F-1 ☐ H-1 ☐ H-2 ☐ H-3 ☐ H-4 ☐ H-5 ☐ I-1

☐ I-2 ☐ I-3 ☐ I-4 ☐ M ☐ R-1 ☐ R-3 ☐ R-4

☐ S-1 ☐ S-2 ☐ U ☐ MIXED ☐ NOT APPLICABLE

Proposed Type of Occupancy

See Chapter 3 of the NC Building Code

☐ F-1 ☐ H-1 ☐ H-2 ☐ H-3 ☐ H-4 ☐ H-5 ☐ I-1

☐ I-2 ☐ I-3 ☐ I-4 ☐ M ☐ R-1 ☐ R-3 ☐ R-4

☐ S-1 ☐ S-2 ☐ U ☐ MIXED ☐ NOT APPLICABLE

H. Electrical Information

☐ New Electrical Service _________________ amps

From _________________ amps to _________________ amps

☐ Electrical Service Change _________________ amps to _________________ amps

☐ Other electrical work (as described in Section F)

I. Plumbing Information (if applicable)

☐ New Water Heater Gallons _________________ Fuel Type

☐ Water Heater Change Current Gallons _________________ Proposed Gallons _________________ ☐ Electric or ☐ Gas

☐ Other plumbing work (as described in Section F)
J. HVAC Information (if applicable)

- **New HVAC**
  
- **HVAC Change**

- **Other HVAC work (as described in Section F)**

<table>
<thead>
<tr>
<th>Current Type of System</th>
<th>Boiler</th>
<th>Heat Pump</th>
<th>Furnace</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proposed Type of System</td>
<td>Boiler</td>
<td>Heat Pump</td>
<td>Furnace</td>
<td>Other</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Current Fuel Type</th>
<th>LP Gas</th>
<th>Natural Gas</th>
<th>Electric</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proposed Fuel Type</td>
<td>LP Gas</td>
<td>Natural Gas</td>
<td>Electric</td>
<td>Other</td>
</tr>
</tbody>
</table>

- **Note:** Applicant must submit a site plan showing the location of new outdoor equipment or outdoor equipment that is changing location.

K. Gas Information (if applicable)

- **LP Gas**
- **Natural Gas**
- **Is this a gas conversion?**
- **Yes or No**

List all vented appliances to be connected:

List all unvented appliances to be connected:

- Carbon monoxide detectors are required for fuel operated appliances.

L. Fire Alarm/Suppression Information (if applicable)

<table>
<thead>
<tr>
<th>Fire Alarm System</th>
<th>New</th>
<th>Renovation</th>
<th>NA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fixed Fire Suppression System</td>
<td>New</td>
<td>Renovation</td>
<td>NA</td>
</tr>
<tr>
<td>Sprinkler System</td>
<td>New</td>
<td>Renovation</td>
<td>NA</td>
</tr>
<tr>
<td>Standpipe System</td>
<td>New</td>
<td>NA</td>
<td></td>
</tr>
</tbody>
</table>

M. Water & Wastewater Utility Information

- **Town:**
  - Water and/or Sewer
  - Well and/or Septic

- **Commercial Kitchen?**
  - Yes
  - No

- **Industrial Pretreatment Required?**
  - Yes
  - No

- **Backflow Prevention Device**
  - New
  - Renovation
  - NA
### N. Design Professional Information (list all design professionals involved in project)

Designer is an:  
- [ ] Architect  
- [ ] Engineer  
- [ ] Owner  
- [ ] Other: ____________________________  

Name:  

Company:  

Complete Mailing Address (Street, City, Zip):  

Phone Number:  

Email Address:  

Additional Designer Information: If additional designers are involved beyond the 1 listed, please provide additional info on a separate sheet.

### O. Contractor Information

List all contractor types needed under this permit. All listed contractors must complete a Contractor Regulation Form. Project over $30,000.00 require proof of Workers Compensation or proof that Workers Compensation is not required.

- [ ] General Contractor  
- [ ] Electrical Contractor  
- [ ] Plumbing Contractor  
- [ ] HVAC Contractor  
- [ ] Gas Contractor  
- [ ] Fire Alarm Contractor  
- [ ] Fire Sprinkler Contractor  
- [ ] Refrigeration Contractor  
- [ ] Exempt General Contractor (project value < $30,000.00)  
- [ ] Owner (self) Contractor*

*If you wish to act as an owner (self) contractor, you must complete an Owner Exemption Affidavit. You must own and occupy the property as your primary residence and/or business with no intention to rent, lease, sell, or gift the property within 12 months of completion of work.

### P. Applicant Signature and Property Owner Authorization

I hereby certify that I am authorized to submit this application; that all information is correct and complete; and all work will comply with the State Building Code and all other applicable State and local laws, ordinances, and regulations. I will ensure that the Planning and Inspections Department is notified of any changes in the approved plans and specifications for the project permitted herein.

**Applicant (Print)  
Applicant (Signature)  
Date**

**Property Owner (Print)  
Property Owner (Signature)  
Date**

---

**Official Use Only**

Permit Name:  

 Permit Number:  

Date:  

Fee:  

Receipt Number:  

Method of Payment:  
- [ ] Cash  
- [ ] Check  

Paid By:  

---

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