

# NON-RESIDENTIAL BUILDING PERMIT APPLICATION

## HERTFORD COUNTY CODE ENFORCEMENT Building Inspections

307 W Tryon St. • PO Box 424, Winton, NC 27986  
Office: (252) 358-7814 • Fax: (252) 358-1241

Project Address: \_\_\_\_\_ Parcel #: \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

Property Owner: \_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

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

Email Address \_\_\_\_\_

Project Contractor: \_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

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

License #: \_\_\_\_\_ Classification: \_\_\_\_\_ Email Address: \_\_\_\_\_

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**Description of proposed work:** \_\_\_\_\_

**Project Cost:** \$ \_\_\_\_\_

Type of Construction: Remodel \_\_\_ Addition \_\_\_ New \_\_\_ N/A \_\_\_ Other \_\_\_\_\_

Type of Occupancy: Check all that apply

Assembly  Institutional  Business  Mercantile  Educational

Residential  Factory  Storage  High-Hazard  Utility

Building Area: Total Renovation Area Sq. Ft: \_\_\_\_\_ Area per floor sq. ft: \_\_\_\_\_

Building Height: \_\_\_\_\_ sq. ft. No. of Stories: \_\_\_\_\_

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Utilities: Water: \_\_\_ Public \_\_\_ Private Environmental Health Permit #: \_\_\_\_\_

Sewer: \_\_\_ Public \_\_\_ Private Environmental Health Permit #: \_\_\_\_\_

Gas Provider: \_\_\_\_\_ Electric Provider: \_\_\_\_\_

Zoning Authorization: \_\_\_ Town \_\_\_ County \_\_\_ N/A Application # \_\_\_\_\_

**Accessory Structures:**  Accessory Building Size: \_\_\_\_\_ (sq. ft.) Conditioned \_\_\_\_\_

Solid Fence  Tower  Swimming Pool  Other \_\_\_\_\_

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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 Inspections Department will be notified of any changes in the approved plans and specifications for the project permitted herein. • Permits expire 6 months after the issue date if no inspections are requested. Permits also expire when work has started but discontinued for 12 months from the last inspection date.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**ALL PERMIT FEES ARE NON-REFUNDABLE** – Checks payable to: Hertford County Inspections – Cash/Check ONLY

For parcel numbers go to [https://maps.roktech.net/ROKMAPS\\_Hertford/](https://maps.roktech.net/ROKMAPS_Hertford/) • **All trades must sign and purchase permits separately**

**The following items MUST be attached with this application for review:**

JNC Contractor's License  Proof of Ownership/Owners Agency  Approved Plans  Copies of Contract  Scope of Work

### **Permit Application Fees (office use only):**

Project Cost (rounded up to nearest \$1,000): \$ \_\_\_\_\_ / 1,000 x 5.00 = \$ \_\_\_\_\_

Cash/Check #: \_\_\_\_\_ Paid By: \_\_\_\_\_ Date: \_\_\_\_\_ Received By: \_\_\_\_\_