

# PERMIT APPLICATION FOR TRADES

## 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 # \_\_\_\_\_

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

Address (if different from project address): \_\_\_\_\_

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

\*\*\*\*\*

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

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

Primary/Secondary Residence     Non-Residential     Rental Property

**Check Permit Requested:** \*\*\*Contractors must provide a copy of NC License\*\*\*

Electrical     Mechanical     Plumbing     Fuel Gas     Insulation

Contractor: \_\_\_\_\_ Address: \_\_\_\_\_

License #: \_\_\_\_\_ Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

❖ **Electrical:** Amps: \_\_\_\_\_ Volts: \_\_\_\_\_ **Electrical Provider:**  REA  Dominion

❖ **Mechanical:** # of Units \_\_\_\_\_

❖ **Plumbing:** # of bathrooms: \_\_\_\_\_ Total # of Fixtures: \_\_\_\_\_

❖ **Water Provider:**  Public  Private    **Sewer:**  Public  Private

\*\*\*\*\*

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

Applicant Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_ 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/)

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

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