

**STOKES COUNTY INSPECTIONS DEPARTMENT  
APPLICATION FOR SINGLE FAMILY DWELLING  
BUILDING/ZONING PERMIT**

Date \_\_\_\_\_ Power Company \_\_\_\_\_

Address of Job \_\_\_\_\_

Property Owners Name \_\_\_\_\_ Phone \_\_\_\_\_  
Current Mailing Address \_\_\_\_\_

Contractor's Name \_\_\_\_\_  
Address \_\_\_\_\_

Office # \_\_\_\_\_ Cell phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
License # \_\_\_\_\_ Workman's Comp Affidavit Yes \_\_\_\_\_ No \_\_\_\_\_

Plumbing Contractor Name \_\_\_\_\_

Office # \_\_\_\_\_ Cell phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Address \_\_\_\_\_ License# \_\_\_\_\_

Heating/Air Contractor \_\_\_\_\_ Phone \_\_\_\_\_

Office # \_\_\_\_\_ Cell phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Address \_\_\_\_\_ License# \_\_\_\_\_

Electrical Contractor Name \_\_\_\_\_ Phone \_\_\_\_\_

Office # \_\_\_\_\_ Cell phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Address \_\_\_\_\_ License# \_\_\_\_\_

**ITEMS REQUIRED FOR A PERMIT TO BE ISSUED**

- Copy of Septic Approval
- One set of Plans to have in the office
- Lien Agent Requirement ([www.liensnc.com](http://www.liensnc.com))
- Site Plan

Total Sq Ft 1<sup>st</sup> Floor \_\_\_\_\_ 2<sup>nd</sup> Floor \_\_\_\_\_

Basement \_\_\_\_\_ Heated or Unheated \_\_\_\_\_

Service Electrical Amp Size \_\_\_\_\_ Number of Gas Appliances \_\_\_\_\_

Garage \_\_\_\_\_ Bonus Room \_\_\_\_\_ Porches & Decks \_\_\_\_\_

Construction Value of Home \$ \_\_\_\_\_

\_\_\_\_\_  
Signature of Homeowner or Contractor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Code Enforcement Officer

\_\_\_\_\_  
Date