



NEW HANOVER COUNTY
CODE ENFORCEMENT SERVICES

NEW HANOVER COUNTY BUILDING PERMIT

APPLICATION TYPE: OCCUPANCY CERTIFICATION

(PLEASE PRINT CLEARLY)

APPLICATION # _____
(For Office Use)

"PROJECT RESPONSIBILITY"

APPLICANT'S NAME _____ DATE _____

PROJECT ADDRESS _____ CITY _____ ZIP _____

CONTRACTOR _____ LICENSE # _____ ACCOUNT # _____

ADDRESS _____ CITY _____ ST _____ ZIP _____

PHONE () _____

OWNER'S NAME _____ PHONE () _____

OWNER'S ADDRESS _____ CITY _____ ST _____ ZIP _____

PROJECT CONTACT PERSON: _____ PHONE () _____

If Commercial, the Last Occupancy/ Business in this Bldg? _____

***NOTE: THIS PERMIT APPLICATION IS FOR AN EXISTING BUILDING IN WHICH YOU ARE REQUESTING POWER TO BE TURNED ON AND/OR YOU ARE REQUESTING OCCUPANCY APPROVAL. THERE CAN BE A CHANGE IN OWNER OR TENANT BUT THERE CAN NOT BE A CHANGE IN THE OCCUPANCY CLASSIFICATION. A CHANGE IN THE OCCUPANCY TYPE WILL REQUIRE A "CHANGE OF USE" PERMIT.

What will this Building be used for now? _____

DISCLAIMER: I hereby certify the information submitted on this application is correct and that I am not doing any "work" which requires a permit from the New Hanover County Inspections Department. I understand I must obtain appropriate permits for work as required by the NC State Building Codes, other applicable State and local laws, ordinances and regulations.
(Print Name)

OWNER / AGENT: _____ SIGNATURE _____

CIRCLE ONE: COMMERCIAL OR RESIDENTIAL FIRE DISTRICT? YES / NO

IS THERE A NATURAL GAS LINE LOCATED ON THIS PROPERTY? YES / NO

IS THERE CURRENTLY ELECTRICAL POWER ON THIS BUILDING? YES / NO

WATER: CITY / COUNTY / COMMUNITY SYSTEM / PRIVATE WELL

SEWER: CITY / COUNTY / CENTRAL SEPTIC / PRIVATE SEPTIC / COMMUNITY SYSTEM

PAYMENT METHOD: Cash / Check (Payable to New Hanover County) / Bill Account / MasterCard / Visa

(FOR OFFICE USE ONLY)

ZONE _____ SETBACKS: F _____ LH _____ RH _____ B _____

Zoning Officer _____ Approval Date: _____ FLD _____ BFE+2 = _____

Comments: _____ Permit Fee: \$ _____