



Building Standards Department
BUILDING PERMIT APPLICATION

For Permit Center Use Only

Submittal Date: _____

Permit #: _____

Parcel: _____ - _____ - _____

Project Address: _____

Total Project Cost: \$ _____ Subdivision Name: _____ Lot: _____ Phase: _____

Owner/Tenant: _____

Address: _____ City: _____

State: _____ Zip Code: _____ Phone No. _____

Property Use: _____

Description of Proposed Work: _____

Heated SQ FT: _____ Unheated SQ FT: _____

UTILITIES: New Existing

Power Company: _____

Gas Company: _____

Electric Appliances: _____

Gas Appliances: _____

All residential inspections for dwellings covered by the NC Building and Residential Code will include verification of the presence of carbon monoxide alarms as required by City of Monroe Ordinance 150.10 (C)(1).

Flood Plain: YES NO Historic District: YES NO Acreage: _____ No. of Stories: _____

Downtown: YES NO Site Improvement: YES NO

Water Supply: City County Private Well Community Sewer Type: City County Septic Permit

RESIDENTIAL

Single Family Modular Duplex Apartment Accessory Building Addition Renovations Accessory

Mobile Home: Year: _____ Make: _____ Size: _____

Serial #: _____

COMMERCIAL

Type of Construction: I-A I-B II-A II-B III-A III-B IV V-A V-B

Group: Assembly Business Educational Mercantile Factory/Industrial Institutional Storage

Utility/Misc _____

CONTRACTOR(S):

BUILDING: _____
Address: _____
City/St: _____ Zip: _____
Phone: _____ Email: _____

| |
|----------------------------------|
| Contract Cost \$ _____ |
| NC License #: _____ |

ELECTRICAL: () No () Yes **MECHANICAL:** () No () Yes **PLUMBING:** () No () Yes

Sub contractors must complete their own application/ sub contractor forms.

- **ALL INFORMATION MUST BE COMPLETED PRIOR TO APPLICATION BEING PROCESSED.**
- **WORK PERFORMED ON STRUCTURES USED FOR COMMERCIAL USE MAY REQUIRE PLANS OR MORE INFORMATION PRIOR TO ISSUING A PERMIT.**
- **THIS APPLICATION BECOMES A PERMIT ONLY UPON APPLICATION APPROVAL AND PAYMENT OF ALL FEES.**

I certify that I am the property owner, am authorized to sign on behalf of the property owner, or am otherwise legally authorized to sign this application. If permits are granted, I hereby certify that all information in this application is correct and that all work will comply with the North Carolina State Building Code and all other applicable city ordinances, local laws and regulations of the State of North Carolina regulating such work and the specifications or plans submitted. The Building Standards Department will be notified of any changes in the approved plans and specifications for the projects permitted herein. By signing this application, I am certifying that I, the applicant, have full authority and license from the holder of the copyright to use the sealed plans, drawings, or diagrams submitted with this application, and I agree to indemnify and hold harmless the City of Monroe for any losses or claims incurred by the City arising from review and approval of such plans by the City of Monroe. I hereby affirm that the foregoing statements are accurate and correct to the best of my knowledge. By signing and submitting this document, you agree that all signatures where required may be Electronically Signed by either party pursuant to NCGS 66-315(b).

PRINT APPLICANT'S NAME: _____

APPLICANT'S SIGNATURE: _____ **DATE:** _____

ADDRESS: _____ **CITY:** _____ **STATE:** _____ **ZIP:** _____

PHONE: _____ **MOBILE:** _____ **FAX:** _____

EMAIL: _____

METHOD OF PAYMENT: Cash Check Credit

*Permit Center
P.O. Box 69 Monroe, NC 28111
300 W. Crowell Street, Monroe, NC 28110
Telephone: (704)282-4524 Fax: (704)282-4735 Email: PermitCenter@monroenc.org*