

NEW HANOVER COUNTY
DEPARTMENT OF BUILDING SAFETY
230 Government Center Dr. Suite 170
Telephone (910) 798-7308
Fax (910) 798-7060

Nicholas Gadzekpo
Director of Building Safety

*****IMPORTANT NOTICE*****

FOR COMPLETE ELECTRONIC PROJECT SUBMITTALS BY EMAIL

If you wish to submit your Commercial or Residential project electronically by email, please attach your electronic plans in the “pdf format along with your application” before clicking the send button.

FOR COMPLETE ELECTRONIC PROJECT SUBMITTALS IN PERSON

If you wish to submit your Commercial or Residential project in person on CD, please fill out the building permit application on line, print it, scan and put it on your CD along with the plans and Appendix B if applicable in the “pdf format” & bring your CD to the Development Services Center, located at 230 Government Center Drive; Suite 170.

If you have questions about the electronic submittal process, please call the Development Services Center at (910) 798-7308.

Please note that we except Cash, Checks, and Credit Cards (American Express, Discover, VISA, and MasterCard).

Thank you.

NEW HANOVER COUNTY BUILDING PERMIT

APPLICATION TYPE: COMMERCIAL

PLEASE ANSWER ALL QUESTIONS APPLICABLE TO YOUR PROJECT

"Project Responsibility"

APPLICATION
Number
(Office Use)

APPLICANT'S NAME: _____ DATE: _____
DEVELOPER: _____ PHONE #: _____
PROJECT ADDRESS: _____ CITY: _____ ZIP: _____
OCCUPANT/BUSINESS NAME: _____
PROPERTY OWNER'S NAME: _____ PHONE #: _____
OWNER'S ADDRESS: _____ CITY: _____ ST: _____ ZIP: _____
CONTRACTOR: _____ LICENSE #: _____
ADDRESS: _____ CITY: _____ ST: _____ ZIP: _____
EMAIL ADDRESS: _____ PHONE #: _____
PROJECT CONTACT PERSON: _____ PHONE #: _____

(Check All That Apply)

EXIST CONSTRUCTION: ALTERATION RENOVATION GENERAL REPAIRS RELOCATION
If Relocation, is there a Natural Gas Line on the Current Site? Yes No IS BLDG SPRINKLERED? Yes No
NEW CONSTRUCTION: ERECT NEW STRUCTURE FAST TRACK SHELL UPFIT ADD TO EXIST STRUCTURE
ACCESSORY STRUCTURE: _____

If UPFIT - The Shell Permit #: _____ Is Elect Power on this Building Yes NO

***** IS THIS A CHANGE OF OCCUPANCY USE? YES NO *****

IF Yes, what was the Previous Occupancy Type? _____ What is the New Occupancy
Type? _____
ARCH DESIGN PROFESSIONAL: _____ PH: _____ NC REG #: _____
ENGR DESIGN PROFESSIONAL: _____ PH: _____ NC REG #: _____

DESCRIPTION OF WORK: _____

Is food or beverages prepared or served in this structure? Yes No Is The Property Located In The Floodplain? Yes No

DISCLAIMER: 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 and ordinances and regulations. The NHC Development Services Center will be notified of any changes in the approved plans and specifications or change in contractor or contractor information. ***NOTE: Any Work Performed W/O the Appropriate Permits will be in Violation of the NC State Bldg Code and Subject to Fines Up To \$500.00***

OWNER/CONTRACTOR: _____ SIGNATURE: _____

(Qualifier)

(Print Name)

Note: Demolition notifications & asbestos removal permit applications are to be submitted using the application form (DHHS-3768) whether the facility or building was found to contain Asbestos or not. You are required to call the National Emission Standards for Hazardous Air Pollutants (NESHAP) at (919)707-5950 at least 10 days prior to the demolition of any facility or building. See Asbestos Web Site: <http://www.epi.state.nc.us/epi/asbestos/ahmp.html>

TOTAL PROJECT COST: _____ BUILDING HEIGHT: _____ # OF UNITS: _____
TOTAL AREA SQ FT: _____ SQ FT PER FLR: _____ # OF STORIES: _____
TOTAL SQ FT UNDER ROOF: _____ # OF STRUCTURES: _____ # OF FLOORS: _____

ACRES DISTURBED: _____ EXST LAND DISTURBING PERMIT? YES NO

NEW IMPERVIOUS AREA: _____ SQ FT EXISTING IMPERVIOUS AREA: _____ SQ FT

PROPERTY USE: OFFICE RESTAURANT MERCANTILE EDUC APT CONDO OTHEF _____

WATER: CFPUA COMMUNITY SYSTEM WELL ZONING USE CLASSIFICATION _____

SEWER: CFPUA CENTRAL SEPTIC PRIVATE SEPTIC COMMUNITY

SYSTEM

*** SEPARATE PERMITS REQUIRED FOR ELECT, MECH, PLBG, GAS EQUIP, PREFABS & INSERTS

PAYMENT METHOD: CASH CHECK (PAYABLE TO NHC) AMERICAN EXPRESS MC/VISA DISCOVER
(FOR OFFICE USE ONLY)

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

Approval: _____ City: _____ DATE: _____ FLOOD: _____ BFE+2ft: _____

A V N

Comment _____ PERMIT FEE: _____

*DISCLAIMER: SUBMITTING THIS APPLICATION MEANS THAT THE SUBMITTAL CHARGE IS NON-REFUNDABLE