

SPR # \_\_\_\_\_

CASE # \_\_\_\_\_

**COMMERCIAL FOUNDATION ONLY  
BUNCOMBE COUNTY PERMIT APPLICATION**

Site Location: \_\_\_\_\_ PIN # \_\_\_\_\_

Directions: \_\_\_\_\_

Permit Type: New Building: Foundation Only

Food Service: N Y      Tattoo Parlor: N Y      Daycare, Nursing Home or Hospital: N Y

Foundation: Basement      Crawlspace      Slab      Piers      Other \_\_\_\_\_

Project Description: \_\_\_\_\_ Use of Property: Owner Occupied      Rental      Sale

Total Square Footage \_\_\_\_\_

Height \_\_\_\_\_ # Of Stories Total \_\_\_\_\_

Owner: \_\_\_\_\_ Phone # \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Applicant \_\_\_\_\_ Phone # \_\_\_\_\_

Applicant email address: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contractor: \_\_\_\_\_ NCGC LIC # \_\_\_\_\_ Phone # \_\_\_\_\_

Sub-Contractors: Electrical \_\_\_\_\_ State Lic # \_\_\_\_\_

Mechanical \_\_\_\_\_ State Lic # \_\_\_\_\_

Plumbing \_\_\_\_\_ State Lic # \_\_\_\_\_

Sprinkler \_\_\_\_\_ State Lic # \_\_\_\_\_

Fuel Piping \_\_\_\_\_ State Lic # \_\_\_\_\_

Other \_\_\_\_\_ State Lic # \_\_\_\_\_

Lien Agent Name: \_\_\_\_\_

Building Contract Cost \_\_\_\_\_

Electrical Contract Cost \_\_\_\_\_

Mechanical Contract Cost \_\_\_\_\_

Plumbing Contract Cost \_\_\_\_\_

Sprinkler Contract Cost \_\_\_\_\_

Fuel Piping Contract Cost \_\_\_\_\_

Refrigeration Contract Cost \_\_\_\_\_

OTHER \_\_\_\_\_

TOTAL CONTRACT COST \_\_\_\_\_

**UTILITIES: CIRCLE APPLICABLE TYPE(S)**

**ELECTRIC:** Duke Power      Duke Energy Progress      Haywood EMC      French Broad EMC

**WATER:** New      Existing      Public Water      Private Well      Community Well

**SEWER:** New      Existing      Septic      MSD      Other \_\_\_\_\_

The undersigned hereby certifies that he/she is the contractor and authorized agent of the owner and the above information is correct to the best of his/her knowledge and hereby makes application for a permit and inspection of work described above. All work will be done in accordance with all applicable Federal, State and local laws and regulations and that it is understood that this permit will expire if work is not commenced and inspected within six months of the date of issue. This permit will also expire if work stops at any time for 12 months or more and no inspections are performed to verify work in progress.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name