

SPR# _____

PERMIT# _____

AMENDMENT TO EXISTING COMMERCIAL PERMIT
ONCE COMPLETE EMAIL APPLICATION TO PERMITDOCS@BUNCOMBECOUNTY.ORG

Site Location: _____ PIN# _____

Explanation of work to be amended FROM THE ORIGINAL PERMIT APPLICATION

Check and complete all that apply TO THE ORIGINAL APPLICATION

- Amending Building _____ Amended Cost _____
 - Amending Stories: Original _____ New: _____
 - Amending Height: Original: _____ New: _____
 - Amended Heated Sq. Ft. Original: _____ New: _____
 - Amended Unheated Sq. Ft. Original: _____ New: _____
 - Amended Basement Sq. Ft. Heated Original: _____ New: _____
 - Amended Basement Sq. Ft. Unheated Original: _____ New: _____
 - Amended Foundation Type Original: _____ New: _____
- Amended Solar: Original Cost: _____ New Cost: _____
- Amended Electrical: Original Cost: _____ New Cost: _____
- Amended Plumbing: Original Cost: _____ New Cost: _____
- Amended Mechanical: Original Cost: _____ New Cost: _____
- Amended Fire Sprinkler: Original Cost: _____ New Cost: _____
- Amended Gas Piping Original Cost: _____ New Cost: _____
- Amended Other: Original Cost: _____ New Cost: _____
- ADDING Sub-Contractors: **for interior work only** (exterior work requires additional permit)
 - Electrical _____ State Lic # _____
 - Mechanical _____ State Lic # _____
 - Plumbing _____ State Lic # _____
 - Fuel Piping _____ State Lic # _____
 - Other _____ State Lic # _____

ADDING/CHANGING CONTACT INFORMATION: ENTER NEW INFORMATION BELOW

Printed name: _____

Email Address: _____

THE BELOW INFORMATION CANNOT CHANGE FROM ORIGINAL APPLICATION, SECTION MUST BE COMPLETED

Owner: _____ Phone# _____

Address: _____ City _____ State Zip _____

Applicant: _____ Phone# _____

Applicant email address: _____

Address: _____ City _____ State _____ Zip _____

Contractor: _____ NCGC LIC# _____ Phone# _____

The undersigned hereby certifies that he/she is the contractor OR authorized agent of the owner, and the above information is correct to the best of his/her knowledge and hereby makes application for amendments per the above.

Applicant Signature

Date

Printed Name