CUMBERLAND COUNTY PLANNING & INSPECTION DEPT.

PO DRAWER 1829, FAYETTEVILLE, NC 28302-1829

(910)321-6666 FAX (910)321-6637

APPLICATION FOR PERMIT _Electrical

____Mechanical

_Plumbing

 $\underline{www.co.cumberland.nc.us/planning.aspx}$

NOTE: Incomplete applications will not be processed

WORK PERFORMED ON A: NEW STRUCTU	RE ADDITION	EXISTING STRUCTURE	
PROJECT ADDRESS	City	Zip	
Subdivision/Development	Lot	Bldg Unit	
Directions:			
PROPERTY OWNER	Phone #		
Prop. Owner's Address	City	State Zip	
CONTRACTOR	Phone #	License #/Class	
Contractor Address	_ City St Zip_	License #/Class	
ELECTRICAL Structure is (circle): RESIDENTIAL	MULTI-FAMILY COMMERCIA	AL-Provide Contract Cost \$	
Temp Service-Res/Com (\$35)	Service-New/ChangeSwimming Pools (\$40Appliance or Mechan	\$	
Commercial-All work \$	Mechanical Contractor		
DESCRIBE WORK IN DETAIL BELOW:		TOTAL FEE: \$	
MECHANICAL Structure is (circle): RESIDENTIAL	MULTI-FAMILY COMMERCI	AL-Provide Contract Cost \$	
Gas Piping includes 3 outlets (\$35)\$x \$6 \$	Heat pump-New/Cha (per system/or any)	part thereof)	
First Appliance (\$35)	Gas Pack-New/Chan (per system/or any		
Multi-Family, # of units x \$46 \$	Air Condition-New/O		
Commercial-All work \$ NEW OR EXISTING DUCT WORK (circle-one)	Furnace-New/Chang Electrical Contractor for		
DESCRIBE WORK IN DETAIL BELOW:		TOTAL FEE: \$	
PLUMBING Structure is (circle): RESIDENTIAL	MULTI-FAMILY COMMERCI	AL-Provide Contract Cost \$	
Water (\$35)	One Bath, or partial	bath (\$35)	
DESCRIBE WORK IN DETAIL BELOW:		TOTAL FEE: \$	
I hereby certify that all information in this application is correct and all work will comply with the North Carolina State Building Code and all other applicable State and local laws, ordinances and regulations. The Planning and Inspection Department will be notified of any changes in the approved plans and specifications for the project permitted herein.			
Applicant Signature	Printed Name	Date	
Payment may be made by cash, check, Mastercard or Visa. PURSUANT TO NCGS 25-3-506, A PROCESSING FEE WILL BE CHARGED FOR ALL RETURNED CHECKS			
Inspector Approval:	Date:	03/12	

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HOMEOWNER CERTIFICATION

This is to certify that I,		;
•	Print Name	
personally own <u>and</u> r	eside in the residence located	d at:
Street Address:		
City/State/Zip:		
Subdivision:		
I wish to perform the v (Check any that are app	vork on my personal residenc plicable)	ce as noted below:
Electrical	Plumbing	Mechanical
-	· ·	espections, making any corrections and paid in full prior to final inspections.
someone else, that indaccordance with North	ividual must be properly licer Carolina General Statutes. F	the work myself and choose to hire ensed and must obtain their own permit in Failure to comply with these Statutes may. It will further result in my permit(s)
Attested to, this date _	·	
Applicant:	D	Day Phone No

Application—PME4-06