

### TOWN OF CLAYTON

Inspections Department P.O. Box 879 Clayton, North Carolina 27528 Office (919)553-5002 Fax (919)553-1720

# RESIDENTIAL PERMIT APPLICATION DOCUMENT LIST

BUILDER NAME LOT #/SUBDIVISION ADDRESS

TO PREVENT DELAYS IN PLAN REVIEW, ALL PERMIT APPLICATIONS MUST INCLUDE:

COMPLETE PERMIT APPLICATION

1 SET OF BUILDING PLANS

1 COPY OF RESIDENTIAL DOCUMENT LIST

1 COPY OF WORKERS' COMPENSATION COMPLIANCE VERIFICATION

1 COPY OF LIEN AGENT INFORMATION (WWW.LIENSNC.COM)

IF AN ITEM DOES NOT APPLY TO YOUR PLANS, PLEASE INDICATE WITH N/A WHERE APPROPRIATE.

WELL/SEPTIC TANK PERMIT #

### CONSTRUCTION DRAWINGS: (must include date drawn and "Drawn by" name)

FOUNDATION TYPE:	CRAWL	SLAB	BASEMENT	
FLOOR PLAN:	1ST	2ND	3RD	BASEMENT
FRAMING LAYOUTS:	1ST	2ND	3RD	ROOF
FRAMING DETAILS:				
TRUSS DRAWINGS OR TRUSS LAYOUT (at time of rough-in):				
STEEL DETAILS:				
SCREENED PORCH DETAILS:				
OTHER:				

#### ENGINEERING DOCUMENTS: (must have NC Registry Seal by Architect or P.E.)

STRUCTURAL BEAMS - STEEL - LVL:

TRUSS LAYOUT (at time of rough-in):
CONCENTRATED LOAD BEARINGS:

OTHER:



FOR OFFICE USE ONLY

Permit Number:



Plumbing: Mechanical:

Electrical:

Fire Protection:

## RESIDENTIAL PERMIT APPLICATION

PROPERTY OWNER

PROPERTY ADDRESS

SUBDIVISION LOT# POWER TOWN OTHER

WATER SOURCE TOWN COUNTY WELL SEWER SEPTIC NATURAL GAS? YES NO

PERMIT APPLICANT

APPLICANT ADDRESS

PHONE NUMBER EMAIL

MANUFACTURED/ MODULAR HOME INFO. MAKE SIZE

# OF BEDROOMS COLOR YEAR SERIAL #

SINGLEWIDE DOUBLEWIDE OTHER

### CONTRACTOR INFORMATION

GENERAL ADDRESS LICENSE # PHONE #

ELECTRIC ADDRESS LICENSE # PHONE #

**PLUMBING** ADDRESS LICENSE # PHONE #

MECHANICAL ADDRESS
LICENSE # PHONE #
OTHER ADDRESS

LICENSE # PHONE #

### CONSTRUCTION

NEW ADDITION OTHER: \$ TOTAL JOB COST

HEIGHT # OF STORIES # OF BEDROOMS TOTAL SQ. FT.

### SIGNATURE

The undersigned does hereby declare that the information given above is correct and agrees to comply with all state and local law, local ordinances and regulations, the N.C. State Building Code, and any restrictions shown below.

APPLICANT'S SIGNATURE DATE

PRINT APPLICANT'S NAME

INSPECTOR APPROVAL DATE

ZONING COMPLIANCE #

CO FINAL DATE