

BUILDING PERMIT APPLICATION

Watauga County Planning & Inspections
126 Poplar Grove Connector Suite 201
Boone, NC 28607

Tax Parcel No. _____

Owner _____ Date _____

Mailing Address _____ Telephone _____

Job Site Directions _____

Subdivision Name _____ Lot# _____ Acreage _____ Zoning District _____

Is proposed structure near a river/stream? _____ If yes, distance from _____ Name of river/stream? _____

Does driveway cross river/stream? _____ Proposed grading (area disturbed) _____ Length of Driveway _____

Is proposed structure located adjacent to the Blue Ridge Parkway or Park Service land? _____

General Contractor _____ License No. _____ Telephone _____

Address _____ Cell Phone _____

Contact Person _____ Phone _____

Electrical Contractor _____

Plumbing Contractor _____

Heating & Air Contractor _____

Gas Contractor _____

Grading Contractor _____ Telephone _____

Power Company: Blue Ridge Electric New River Light & Power Mountain Electric

Sewer System: Septic Permit # _____ Community Public Existing (Setbacks Verified)

Water System: Private Well Permit # _____ Community Public Spring Existing (Setbacks Verified)

Permit Type: Single Family Duplex Townhouse Storage Garage Commercial Other _____

Type of Work: New Addition Remodel Repair Demolition Change of Use Other _____

Type of Construction: Frame Modular Log Timber Frame Other _____

Type of Foundation: _____ Type of Siding: _____ Type of Heat: _____

No. Stories: _____ Height of Proposed Structure From Top of Foundation: _____

No. of Bedrooms: _____ No. of Full Baths: _____ No. of Half Baths: _____

Heated Sq.Ft. _____ Unheated Sq.Ft. _____

Sketch Structure and distances from common property lines. Property lines/corners must be clearly marked in field.

3rd Floor _____

2nd Floor _____

1st Floor _____

Bsmt. _____

Garage _____

Total _____

Total Estimated Cost: \$ _____

Mail Permit Pickup Permit

The undersigned agrees to conform to all applicable laws of the County of Watauga and the State of North Carolina; and further states all statements made hereon are true.

APPLICANT Owner Contractor

OFFICE USE ONLY		Signature
FEES:		TOTAL \$ _____
Heated _____	Recovery Fd _____	Date Paid _____
Unheated _____	Zoning/WS _____	
Postage _____	Floodplain _____	WS/Zoning Permit# _____