



# WATAUGA COUNTY

Department of  
Planning & Inspections

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126 Poplar Grove Connector Suite 201    Boone, North Carolina 28607    (828)265-8043  
Fax (828)265-8080

## MECHANICAL CONTRACTOR LICENSE CHECK AND REGULATION SHEET

Mechanical Contractor:

Name: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Business Phone: \_\_\_\_\_

NC State License Number: \_\_\_\_\_

Project Information:

Property Owner: \_\_\_\_\_

Location of Job: \_\_\_\_\_

Building or Unit #: \_\_\_\_\_

I the undersigned have read and understand the General Statutes pertaining to Mechanical Contracting in North Carolina. I hereby affirm or swear I am licensed and qualified to assume all responsibility and liability of a mechanical contractor upon this project. If I resign or am no longer affiliated with this project, I will notify the Department of Planning and Inspections in Watauga County immediately by phone or in person, and in writing within three (3) working days.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_