

## **Application Submission Instructions: New Residence**

- Residential Building Permit Application
- License Check & Regulation Sheet for each applicable contractor including General Contractor
- Self-Contractor Questionnaire Form (If not using a General Contractor)
- Work Done By Owner Acknowledge Form (If acting as contractor for any trade)
- Affidavit of Workers' Compensation Form
- Copy of NC Lien appointment
- App Health Care Septic & Well Permit
- Erosion Control Certification Form
- Site Plan showing proposed distance from structure to property lines, roads, water bodies..
- Two (2) paper copies of Building Plans. Minimum size of 11x17 for small projects/decks/garages. Minimum 18 x 24 for all new residences.
- Two (2) copies of Plan Specifications Form
- Applicable Fees

### **Additional Requirements for the following:**

Duplex/Townhomes: Plans must include dwelling unit rated separation.

Modular: Plans will be from factory with 3<sup>rd</sup> party seal. They will need to be for the correct wind and thermal zone.

Log/Heavy Timber: Plans must be stamped by a NC Licensed Design Professional  
Insulation Tradeoff Sheet or Rescheck (Log Homes)

**\*Additional permits such as Zoning, Watershed, Grading or Floodplain may be required\***

### **FEES:**

Heated/Finished: \$.30/sq.ft.

Unheated/Unfinished: \$.15/sq.ft.

Recovery Fund: \$10.00

### **How To Submit:**

In- Person

Or

Mailed with check to:

Watauga County Planning & Inspections

126 Poplar Grove Connector

Suite 201

Boone, NC 28607

Or

Emailed to [p&i@watgov.org](mailto:p&i@watgov.org). You will be contacted with link to pay with credit card. Plans will have to be delivered to office.

**All Required Forms Must be Submitted at the Same Time  
or Application Will Be Returned.**



# Residential Building Permit Application

## Property Information

Date: \_\_\_\_\_ **Tax Parcel No.:** \_\_\_\_\_

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

Mailing Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Address of Job Site: \_\_\_\_\_

Job Site Directions: \_\_\_\_\_

## Site Details

Subdivision Name(if applicable): \_\_\_\_\_ Lot# \_\_\_\_\_ Acreage \_\_\_\_\_

Is Home Located Near a River or Stream:  Yes  No If yes, Distance from Stream \_\_\_\_\_

Name of River or Stream \_\_\_\_\_ Will Driveway Cross Stream:  Yes  No

Proposed Grading (area disturbed) including driveway & septic: \_\_\_\_\_ Length of Drive \_\_\_\_\_

## Utilities

**Power Company:**  Blue Ridge  New River  Mountain Electric

**Sewer System:**  Septic Permit # \_\_\_\_\_  Community  Public  Existing (Setbacks Verified)

**Water System:**  Well Permit # \_\_\_\_\_  Community  Public  Existing (Setbacks Verified)

## Contact Information

General Contractor: \_\_\_\_\_

Electrical Contractor: \_\_\_\_\_

Plumbing Contractor: \_\_\_\_\_

HVAC Contractor: \_\_\_\_\_

Fuel Piping Contractor: \_\_\_\_\_

Grading Contractor: \_\_\_\_\_

Primary Contact: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Email: \_\_\_\_\_

## Project Details

**Permit Type:**  Single Family  Duplex  Townhome  Accessory Structure  Other \_\_\_\_\_

**Type of Work:**  New  Addition  Remodel  Repair  Demolition  Change of Use

**Type of Construction:**  Frame  Modular  Log  Timber Frame  Other: \_\_\_\_\_

**# of Stories** \_\_\_\_\_ **Height of Structure from Top of Foundation** \_\_\_\_\_

**Type of Heat:**  Gas Forced Air  Heat Pump  Boiler  Electric  Other \_\_\_\_\_

**# of Bedrooms** \_\_\_\_\_ **# of Full Baths** \_\_\_\_\_ **# of Half Baths** \_\_\_\_\_ **Total Estimate Cost \$** \_\_\_\_\_

## Project Area

Finished Area (sq.ft.) 1<sup>st</sup> Floor \_\_\_\_\_ Basement (sq.ft.) Finished \_\_\_\_\_

2<sup>nd</sup> Floor \_\_\_\_\_ Unfinished: \_\_\_\_\_

Bonus Room \_\_\_\_\_ Garage (sq.ft.) \_\_\_\_\_

Decks/Patios/Porches (sq.ft.) \_\_\_\_\_  Attached  Detached  Basement

The undersigned agrees to conform to all applicable laws of the County of Watauga and the State of North Carolina, and further states that all statements hereon are true. If subdivision lot, I certify that all structures, measured from the eaves, comply with setback requirements found in Watauga County's Planning & Development Ordinances.

\_\_\_\_\_  
 Name (Print) Signature Date



**Watauga County  
Planning & Inspections**

(828)265-8043 • [p&i@watgov.org](mailto:p&i@watgov.org)  
[www.wataugacounty.org](http://www.wataugacounty.org)

# Contractor License Check and Regulation Form

## Property Information

Permit # \_\_\_\_\_

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

Address of Job Site: \_\_\_\_\_

Subdivision/Lot #: \_\_\_\_\_

General Contractor: \_\_\_\_\_

## Contractor Type

- General Contractor    Electrical    Plumbing    Mechanical (HVAC)    Fuel Piping  
 Manufactured Home Dealer    Manufactured Set-Up Contractor  
 Other: \_\_\_\_\_

## Contact Information

Licensed Contractor Name: \_\_\_\_\_

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

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

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

Business Telephone #: \_\_\_\_\_

Business Email: \_\_\_\_\_

Primary Contact: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

I the undersigned, have read and understand the North Carolina General Statutes pertaining to licensed contractors. I hereby affirm or swear that I am a licensed and qualified to assume all responsibility and liability of a licensed contractor for 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 within three (3) business days.

\_\_\_\_\_  
Licensed Contractor Name (Print)

\_\_\_\_\_  
Licensed Contractor Signature

\_\_\_\_\_  
Date

**AFFIDAVIT OF WORKERS' COMPENSATION COVERAGE**  
**N.C.G.S. § 87-14**

The undersigned applicant for Building Permit # \_\_\_\_\_ being the

\_\_\_\_\_ Contractor

\_\_\_\_\_ Owner

\_\_\_\_\_ Officer/Agent of the Contractor or Owner

do hereby aver under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:

\_\_\_\_\_ has/have three (3) or more employees and have obtained workers' compensation insurance to cover them,

\_\_\_\_\_ has/have one or more subcontractor(s) and have obtained workers' compensation insurance covering them,

\_\_\_\_\_ has/have one or more subcontractor(s) who has/have their own policy of workmen's compensation covering themselves,

\_\_\_\_\_ has/have not more than two (2) employee and no subcontractors,

while working on the project for which this permit is sought. It is understood that the Inspection Department issuing the permit may require certificates of coverage of workers' compensation insurance prior to issuance of the permit and at any time during the permitted work from any person, firm or corporation carrying out the work.

Firm name: \_\_\_\_\_

By: \_\_\_\_\_

Title: \_\_\_\_\_

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

**Watauga County Planning & Inspections  
126 Poplar Grove Connector Suite 201  
Boone, NC 28607  
(828)265-8043 • (828)265-8080 (fax)**

## **Erosion Control Certification**

The undersigned applicant for a Watauga County building permit acknowledges the following:

1. I am responsible for preventing off-site sedimentation during the course of my construction project;
2. Should off-site sedimentation occur as a result of my construction, I will cease construction until corrective actions are taken, to include prevention of further sedimentation and clean-up of any off-site damage;
3. I understand that failure to comply may result in withholding by the County of building inspections or issuance of a stop work order until compliance is achieved.

The preceding is pursuant to the Watauga County Erosion Control Ordinance and the NC Sedimentation Pollution Control Act of 1973.

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

Date: \_\_\_\_\_ Tax parcel #: \_\_\_\_\_

# Lien Agent Law

Effective April 1, 2013, North Carolina law will require that an owner (or, as typical with permit applications, the contractor on their behalf) appoint a lien agent when they first contract for improvements to real property. A lien agent is a title insurer or agent also registered as a lien agent with the NC Department of Insurance.

However, the appointment is *not* required for improvements:

- (1) for which the costs of the undertaking are less than \$40,000, either at the time that the original building permit is issued or, in cases in which no building permit is required, at the time the contract for the improvements is entered into with the owner,
- (2) to an existing single-family residential dwelling unit as defined in G.S. 87-15.5(7) that is used by the owner as a residence.

**The identification and contact information for the lien agent must be conspicuously and continuously posted on the property for which the permit is issued until the completion of all construction.**

A website created specifically and solely for purposes of facilitating the filings of appointments of lien agents, the filing of notices to lien agents by potential lien claimants, and searching for these filings will be available April 1, 2013, at [www.liensnc.com](http://www.liensnc.com). So when the owner (or contractor on their behalf) appoints a lien agent through the LiensNC system, it will generate an Appointment of Lien Agent document or form for the property and project, which will include the following information:

- Designated Lien Agent and contact information (c/o LiensNC)
- Unique Entry or Identifying number for the Project
- Owner and contact information
- Contractor (if one)
- Instructions for the owner and/or contractor to post at the property and provide to the permitting office
- “QR Code” for easy access to the property information in the LiensNC system

The lien agent information form (located on reverse side) or document printed from the LiensNC website can be attached to the building permit application and building permit, for it will include the required information the permit office will need.



FOUNDATIONS		
BASEMENT	CRAWLSPACE	MONOLITHIC SLAB
<b>Design</b> (Precast walls, engineered, code, etc.) _____ Height _____ HT of Backfill _____ CMU Block Size _____ Vertical Bars _____ # _____ @ _____ O.C. Horizontal Bars _____ # _____ @ _____ O.C.  <b>* All walls taller than 10' must be designed by a NC Registered Design Professional.</b>	Height _____ HT of Backfill _____ CMU Block Size _____ Vented _____ (Comply w/ R408) Closed _____ (Comply w/R409)  <b>ALL FOUNDATIONS</b> Treated 2x _____ Sill Plate Anchor Bolts Size _____ Spacing _____  Waterproof System _____ Drain System _____  <b>Final grade will be sloped away from the foundation at least 1/2" per foot for the first 10 feet.</b> <b>Water runoff from the roof will be controlled.</b>	<b>FROST LINE 24"</b> Footer Depth _____ Footer Width _____ Reinforcing/Rebar _____ # _____  <b>All Slabs:</b> <b>4" Minimum Concrete</b> <b>4" clean stone w/ 6 mil poly</b>  <b>R-10 perimeter insulation</b>  <b>Garage Slabs must slope floor to door or drain</b>

FLOORS	EXTERIOR WALLS	ROOF
Floor Joist 2x _____ @ _____ O.C. Engineer Truss _____ O.C. I-Joist _____ O.C.  Girder Size _____ 2x _____ Steel Beam _____ *LVL sized by engineers  Pier or column spacing _____ O.C. Sub Floor Thickness _____  <b>Insulation R _____</b>  *Minimum Zone 5: R-30	2x _____ @ _____ O.C. 2x _____ @ _____ O.C.  Wall Height _____ Interior Finish _____ Exterior Finish _____ Sheathing Size _____  <b>*Maintain Fire and Draftstopping</b> <b>* All walls must comply with Table R602.3(5) unless designed by a NC Registered Design Professional.</b>  <b>Insulation R _____</b>  *Minimum Zone 5: R-19	2x _____ @ _____ O.C. Engineered trusses _____ O.C. I-Joist _____ O.C.  Roof to wall attachment method _____ Sheathing _____ Roof Covering _____ Roof Ventilation _____ Ridge _____ Soffit _____ Attic Access _____ <b>*Baffles must be in place before rough-in inspection.</b> <b>Insulation R _____</b>  *Minimum Zone 5: R-38
<b>Log/Timber Frame Construction require a REScheck to demonstrate compliance with code.</b> <b>Energy Efficiency Certificate required on-site at final inspection</b>		

WINDOWS	FIREPLACES	ELECTRICAL SERVICE
DP Rating: _____  Basements, habitable attics & every sleeping room will comply with egress per R310.2 Maximum sill height for egress window is 44"	Masonry _____  Manufactured _____	Location of Service _____  Size of Service: _____ Grounding Electrodes _____

**As the owner or builder, it is my responsibility to ensure all items are implemented to the North Carolina Building Code.**

\_\_\_\_\_  
 Printed Name

\_\_\_\_\_  
 Signature