

# Single-Family & Two-Family (Use 1.06) Building Permit Application

Town of Boone Planning & Inspections Department  
680 W. King Street, Suite C ♦ Boone, North Carolina 28607

Phone (828) 268-6960 ♦ Fax (828) 268-6961 ♦ Email: [planning@townofboone.net](mailto:planning@townofboone.net) ♦ [www.townofboone.net](http://www.townofboone.net)



Pursuant to Town Code Section 155.03 a building permit application shall be considered abandoned and voided and the permit fee will not be refunded if either (A) 180 days has passed since the date the applicant was notified that the permit was ready for pickup and the permit has not been picked up or (B) 180 days has passed since the permit application was submitted and the applicant has not responded to the building inspector's requests for modifications or additional information so as to allow final processing and issuance of the permit. **Note: this form is not a building permit. No work may commence until the actual permit has been issued. Working without permits may result in additional fees being assessed.**

## A. Required to be Submitted at Time of Application (check all that apply)

**Failure to provide the info required on this application may delay the review and subsequent issuance of the requested permit.**

- Digital copies of all paper submittal documents (may be emailed to [planning@townofboone.net](mailto:planning@townofboone.net))
- 3 copies of plans (maximum size 30" x 42")
- Verification that the applicant has submitted a Water and Sewer System Development Fee Application (for Town water and sewer) or written approval from the Appalachian District Health Department (for well and/or septic). See [Section L](#).
- All applicable Contractor, Exempt Contractor, or Self-Contractor Regulation Sheets.
- Lien Agent. NC law requires appointment of a lien agent. Lien Agent appointments are not required for improvements under \$30,000 or to the owner's existing residence, or for public building projects. Visit [www.liensnc.com](http://www.liensnc.com) for more information.
- Property Owner Authorization. If you are not the property owner, you will need to provide documentation of property owner authorization to apply for this permit. You may have the property owner sign this application ([Section O](#)) or the property owner can provide a written and signed authorization that clearly states they are authorizing the applicant to submit this application.
- Permit Fee (See Planning & Inspections Fee Schedule)

Each application is allowed two (2) reviews. The 1st review of the submitted information and a 2nd review if revisions or supplemental information is required based upon the 1st review. Each subsequent review after the 2nd review will be charged at 50% of the original fees charged for the application. These fees shall be paid at the time of resubmittal.

## B. Property Information (Project Location)

Street Address: \_\_\_\_\_

Watauga County Parcel Identification Number: \_\_\_\_\_

## C. Property Owner Information

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

Complete Mailing Address (Street, City, Zip): \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

## D. Applicant Information

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

Company: \_\_\_\_\_

Complete Mailing Address (Street, City, Zip): \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Preferred Method of Contact for Written/Response Documents (select one):  Mail or  Email**

## E. Project Cost

Project Cost: \$ \_\_\_\_\_

## F. Detailed Description of Project

## G. Building Information

Project Type  New Construction  Addition  Renovation/Remodel

Total Square Footage: \_\_\_\_\_

Number of Stories: Current: \_\_\_\_\_ Proposed: \_\_\_\_\_

Building Height: Current: \_\_\_\_\_ Proposed: \_\_\_\_\_

Number of Units: Current: \_\_\_\_\_ Proposed: \_\_\_\_\_

Number of Bedrooms: Current: \_\_\_\_\_ Proposed: \_\_\_\_\_

## H. Electrical Information

New Electrical Service \_\_\_\_\_ amps

Electrical Service Change From \_\_\_\_\_ amps to \_\_\_\_\_ amps

Other electrical work (as described in [Section F](#))

## I. Plumbing Information (if applicable)

New Water Heater Gallons \_\_\_\_\_ Fuel Type

Water Heater Change Current Gallons \_\_\_\_\_ Proposed Gallons \_\_\_\_\_  Electric or  Gas

Other plumbing work (as described in [Section F](#))

## J. HVAC Information (if applicable)

New HVAC \_\_\_\_\_ Ton/BTU

HVAC Change \_\_\_\_\_ Ton/BTU to \_\_\_\_\_ Ton/BTU

Other HVAC work (as described in [Section F](#))

Current Type of System  Boiler  Heat Pump  Furnace  Other: \_\_\_\_\_

Proposed Type of System  Boiler  Heat Pump  Furnace  Other: \_\_\_\_\_

Current Fuel Type  LP Gas  Natural Gas  Electric  Other: \_\_\_\_\_

Proposed Fuel Type  LP Gas  Natural Gas  Electric  Other: \_\_\_\_\_

**K. Gas Information (if applicable)**

LP Gas    Natural Gas    Is this a gas conversion?    Yes or No

List all vented appliances to be connected:

*Carbon monoxide detectors are required for fuel operated appliances.*

\_\_\_\_\_

List all unvented appliances to be connected:

**L. Water & Wastewater Utility Information**

Town:

Private:

Water and/or Sewer

Well and/or Septic

**M. Design Professional Information (list all design professionals involved in project)**

Designer is an:    Architect    Engineer    Owner    Other: \_\_\_\_\_

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

\_\_\_\_\_

Complete Mailing Address (Street, City, Zip):

\_\_\_\_\_

Phone Number:

\_\_\_\_\_

Email Address:

*Additional Designer Information: If additional designers are involved beyond the 1 listed, please provide additional info on a separate sheet.*

**N. Contractor Information**

*List all contractor types needed under this permit. All listed contractors must complete a Contractor Regulation Form. Project over \$30,000.00 require proof of Workers Compensation or proof that Workers Compensation is not required.*

General Contractor    Electrical Contractor    Plumbing Contractor    HVAC Contractor

Gas Contractor    Fire Alarm Contractor    Fire Sprinkler Contractor    Refrigeration Contractor

Exempt General Contractor (project value < \$30,000.00)    Owner (self) Contractor\*

*\*If you wish to act as an owner (self) contractor, you must complete an Owner Exemption Affidavit. You must own and occupy the property as your primary residence and/or business with no intention to rent, lease, sell, or gift the property within 12 months of completion of work.*

**O. Applicant Signature and Property Owner Authorization**

I hereby certify that I am authorized to submit this application; that all information is correct and complete; and all work will comply with the State Building Code and all other applicable State and local laws, ordinances, and regulations. I will ensure that the Planning and Inspections Department is notified of any changes in the approved plans and specifications for the project permitted herein.

<b>Applicant (Print)</b>	<b>Applicant (Signature)</b>	<b>Date</b>
<b>Property Owner (Print)</b>	<b>Property Owner (Signature)</b>	<b>Date</b>

Official Use Only				
Permit Name:				
Permit Number:				
Date:	Fee:	Receipt Number:	Method of Payment: <input type="checkbox"/> Cash <input type="checkbox"/> Check Number: _____	Paid By:

S:\FORMS\PI\_Forms\_Current\Building Permit Forms\Residential\BuildingPermitApplication\_07012019.docx