



NEW HANOVER COUNTY BUILDING PERMIT
APPLICATION TYPE: COMMERCIAL (UPFIT) NEW CONSTRUCTION
(PLEASE PRINT CLEARLY & ANSWER ALL QUESTIONS)

APPLICATION # _____
(For Office Use)

Project Responsibility

APPLICANT'S NAME _____ DATE _____
DEVELOPER _____ PHONE _____

PROJECT ADDRESS _____ CITY _____ ST _____ ZIP _____

SUBDIVISION _____ BLOCK # _____ LOT # _____

CONTRACTOR _____ LICENSE # _____ ACCT # _____
ADDRESS _____ CITY _____ ST _____ ZIP _____
PHONE _____

OWNER'S NAME _____ PHONE _____
OWNER'S ADDRESS _____ CITY _____ ST _____ ZIP _____

PROJECT CONTACT PERSON _____ PHONE _____

DESIGN PROFESSIONAL (GEN) _____ PH: _____ ARCH / ENG. / NC REG# _____
DESIGN PROFESSIONAL (MECH) _____ PH: _____ ARCH / ENG. / NC REG# _____
DESIGN PROFESSIONAL (ELEC) _____ PH: _____ ARCH / ENG. / NC REG# _____
DESIGN PROFESSIONAL (PLBG) _____ PH: _____ ARCH / ENG. / NC REG# _____
OWNER / OTHER _____ PH: _____

DESCRIPTION OF WORK: _____

NEW CONSTRUCTION UPFIT

Shell Application/Permit # _____

DISCLAIMER: I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other applicable State and local laws and ordinances and regulations. The Inspections Dept. will be notified of any changes in the approved plans and specifications for the project permitted herein

OWNER / AGENT: _____ SIGNATURE _____
(Print name)

TOTAL PROJECT COST: _____ BUILDING HEIGHT _____ NO. OF STORIES _____
TOTAL AREA SQ. FT: _____ HEATED _____ UNHEATED _____ AREA PER FLOOR _____
OF STRUCTURES _____ # OF FLOORS _____ # OF UNITS _____ SPRINKLER SYSTEM: Required / Not Req.
NBR OF FIREPLACES: _____ MASONRY / WOODBURNING PREFAB / GAS APPLIANCE PREFAB / WOODBURNING INSERT
PROPERTY USE: OFFICE / RESTAURANT / MERCANTILE / EDUC / OTHER: _____
WHAT IS THE BUSINESS OR COMPANY NAME? _____
ZONING USE CLASSIFICATION: _____

TYPE OF CONST: 1A / IB / IIA / IIB / IIIA / IIIB / IV / VA / VB **OCCUP:** A-1 / A-2 / A-4 / A-5 / B / E / F-1 / F-2 / H-1 / H-2 / H-3 / H-4 / H-5 / I-1 / I-2 / I-3 / I-4 / M / R-1 / R-2 / R-3 / R-4 / S1 / S2 / U / If Mixed Occup, circle each one

ACRES DISTURBED _____ NEW IMPERVIOUS AREA _____ SQ. FT.

WATER: CITY / COUNTY / COMMUNITY SYSTEM / PRIVATE WELL IN A FLOOD PLAIN? YES / NO
SEWER: CITY / COUNTY / CENTRAL SEPTIC / PRIVATE SEPTIC / COMM. SYSTEM

***SEPARATE PERMITS REQUIRED FOR ELECT, MECH, PLBG, GAS EQUIP, PREFABS & INSERTS**

PAYMENT METHOD: CASH / CHECK - Payable to New Hanover County / BILL ACCOUNT / MASTER CARD / VISA
For Office Use _____

ZONE _____ OFFICER _____ SETBACKS: F _____ LH _____ RH _____ B _____
APPROVAL: CITY DATE FLD _____ BFE + 2 ft = _____
A V N

COMMENTS :

PERMIT FEE _____