

Planning & Inspections Department

Planning & Permitting

PO Box 128 • Jacksonville NC 28541-0128 • 910 938-5232 Fax 910 938-5208 • Central Email permittingspecialist@jacksonvillenc.gov

Permit Application

Date: Permit #:					
Type of Use:		☐ Commercial		☐ Residential	☐ Multi-Family
☐ Mobile Home		☐ Townhouse		□ Modular □ Ins	titutional
☐ Swimming Pool		☐ Accessory Bldg		☐ Shell Bldg ☐ Moving Permit	
☐ Daycare/Residential Care ☐ Pre-Fab Stru			e-Fab Structures		
☐ Other (deck, porch, etc.) ☐ Construction Trailer/t-pole			ole		
Type of Work:	□ Ne	w □ Add	dition	☐ Alteration-Upfit	
	☐ Foundation Only			☐ Renovation	
☐ Demolition (please check): ☐ Building ☐ Electric ☐ Plumbing ☐ Mechanical					lumbing □ Mechanical
Square Footage:					
Number of Bedrooms:					
Number of stories:					
Project Address: Project Cost:					Project Cost:
Description of work to be completed:					

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Is there an existing or proposed home occupation, family at this location? \Box Yes \Box No	childcare, family care or group home			
Property Owner:	Phone #:			
Property Owner Address:				
Contact Person:	Phone#:			
Contact Person email:				
Will you be submitting plans electronically? ☐ Yes ☐ No				
Please provide the following information for the person who will upload the plans to our ePlan software:				
Engineer/Architect Name:				
Engineer/Architect Email address:				
Engineer/Architect Phone Number:				

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Bathroom Sink

Bathtub-Shower

Kitchen Sink

Machine

Machine

Spigots

Fountain Drink

Drinking Fountain

Clothes Washing

Outside Water

Service Sink

Mop Sink

Dishwashing Machine

Other, please specify

Stand Alone Shower

Bidet

Urinal

Combo

Plumbing Fixture Summary: To be completed by contractor/owner/applicant and attached to all applications and Certificate of Occupancy applications. Indicate the number of existing and new plumbing fixtures to be incorporated in the building. This will determine assessment fees.

Water Meter Size:		Irrigation Meter Size:		
Water:	_	Sewer:		
Fixture Description Toilet	Existing	Added	Total	

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Licensure/Exemption and Insurance Coverage Certifications

Chapter 87, Article 1 of the NC General Statutes prohibits the City from issuing a building permit unless and until the applicant has complied with the general contractor licensing and insurance coverage requirements in that article (see attached copies of Sections 87-1 and 87-14). To ensure such compliance, the City requires that the applicant make the following certifications.

The undersigned applicant for a building permit certifies that the person, firm, or corporation performing, superintending, or managing the proposed construction or alteration, whether the applicant or another person, firm, or corporation contracted to do so, either:

Is duly licensed as a general contractor under Chapter 87, Article 1 of the NC General Statutes and maintains that license in good standing.		
Licensee name: License #:		
OR		
Is exempt from the statutory licensing requirements for general contractors because:		
☐ The cost of the proposed construction is less than \$30,000; ☐ The building being constructed or altered is located on land owned by the solely for occupancy by the applicant (and family, if a person) for at least 12 r (i.e., the project is not a "speculation" project; or ☐ I am the owner of the proposed building. It is my intention to act as my or understand that the problems which may arise, such as inaccurate or insufficient my responsibility, and I will be left with no resource and must assume total lia problems. I personally have a thorough knowledge of all of the NC State cons☐ The applicant is engaged in the business of farming, owns the land contain building, and intends to use the building for the business of farming after its or	wn general contractor, and I ent construction will be solely bility for correction of the struction codes. ing the constructed or altered	
OR		
Modular Installation Contractor		
$\hfill \square$ I am providing to the City of Jacksonville Planning & Permitting Division a \$ accordance with NCGS Section 143-139.1.	5,000 surety bond in	
AND		
Insurance Coverage: The undersigned applicant also certifies that the person, firm or corporation performing, superintending or managing the proposed construction or alteration, as well as any subcontractor doing so:		
☐ Carries worker's compensation insurance for employees as required by Cha Statutes and will maintain that coverage for the duration of the permit construction of the permit construction of the permit of the permit or any time during the permitted construction or alteration. ☐ N/A Owner assumes insurance liability	uction or alteration; and	

The undersigned applicant further acknowledges that, pursuant to Chapter 87, Article 1A of the NC General Statutes, the City will collect a \$10.00 fee with applications for construction or alteration of a single-family dwelling unit and forward \$9.00 of the fee to the NC Licensing Board for General Contractors, which will deposit it into the Homeowners Recovery Fund for subsequent use in reimbursing homeowners' losses for construction by general contractors.

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As part of the new state law passed April 1st, 2013, you are required to furnish us with a Notice of Appointment of Lien Agent for any projects that have a construction cost of \$30,000 or more. Please go to this website http://www.liensnc.com/ to go through the process of obtaining the Notice of Appointment of Lien Agent. Please see example below of what the Notice looks like. Applications requiring this form will not be accepted unless attached as part of the permit process.

DO NOT REMOVE! Details: Appointment of Lien Agent Filed on: 04/12/2013 Initially filed by: BMorton **Project Property** Designated Lien Agent Print & Post Investors Title Insurance Property Type Contractors: Please post this notice on the Job Other Pre-Permit Workers Suppliers and Subcontractors: Scan this image with your smart Owner Information phone to view this filing. You can then file a Notice to Lien Agent for this project. Notification Alert Emails: 1. Ray Morton@sc.rr.com Contractor Information Filing Location Information: Online: www.liensnc.com • Address: 19 W. Hargett St., Suite 507 / Raleigh, NC 27601 • Email: support@liensnc.com • Fax: (919) 489-5231 · Technical Support Hotline: (888) 690-7384 ·

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Contractor Name:	Phone:
Address:	
Email address:	
Contractor Signature	
*Please note: if you are a Non-Licensed G	eneral Contractor, you cannot submit for subs.
Electrical Contractor Name:	Phone:
Address:	
Email address:	License #:
Electrical Contractor Signature	
Plumbing Contractor Name:	Phone:
Address:	
Email address:	License #:
Plumbing Contractor Signature	
Mechanical Contractor Name:	Phone:
Address:	
Email address:	
Mechanical Contractor Signature	
Fuel Piping Contractor Name:	Phone:
Address:	
Email address:	
Fuel Piping Contractor Signature	