



# PENDER COUNTY PLANNING AND COMMUNITY DEVELOPMENT

## TRADE PERMIT APPLICATION

FAX to: 910-259-1295

PERMIT # \_\_\_\_\_

USE:  RESIDENTIAL  COMMERCIAL

**(APPLICATION WILL NOT BE ACCEPTED FOR PROCESSING UNLESS ALL REQUIRED INFORMATION IS PROVIDED)**

CONSTRUCTION SITE ADDRESS: \_\_\_\_\_

DETAILED DESCRIPTION OF WORK: \_\_\_\_\_

DIRECTIONS TO PROJECT LOCATION: \_\_\_\_\_

PROPERTY OWNER: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY/STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

PERMIT TYPE:  PLUMBING  ELECTRICAL  MECHANICAL  GAS PIPING

TRADE CONTRACTOR (LICENSEE): \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY/STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

LICENSE #: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

(PERMIT WILL BE RETURNED VIA EMAIL WHEN READY UNLESS OTHERWISE SPECIFIED)

ELECTRICAL CONTRACTOR (LICENSEE): \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY/STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

LICENSE #: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

(PERMIT WILL BE RETURNED VIA EMAIL WHEN READY UNLESS OTHERWISE SPECIFIED)

SYSTEM TYPE: PACKAGE / SPLIT / OTHER: \_\_\_\_\_

NUMBER OF UNITS: \_\_\_\_\_ SYSTEM(S) \_\_\_\_\_ TONS \_\_\_\_\_ KW'S \_\_\_\_\_ BTU'S OF HEAT (GAS / OIL)

Will mechanical unit be relocated? Yes  No

I hereby certify that all information in this application is correct and all work will comply with the NC Electrical, Mechanical, Plumbing, Gas Piping Code and all other applicable State and local laws, ordinances and regulations. The Inspections Division will be notified of any changes in the approved application and specifications for the project permitted herein.

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

\*Check in lieu of signature to indicate agreement with the above statement if submitting electronically. Print name below.

\*NOTE\* IF YOU WOULD LIKE FOR YOUR PERMIT TO BE FAXED, PLEASE PROVIDE FAX # \_\_\_\_\_

(FOR OFFICE USE ONLY)

Permit Tech: \_\_\_\_\_ Date: \_\_\_\_\_ Parcel Number: \_\_\_\_\_ Zoning District: \_\_\_\_\_

Flood Zone: \_\_\_\_\_ Mechanical Unit in SFHA: YES / NO BFE: \_\_\_\_\_ EC Required: YES / NO