



**TOWN OF BURNSVILLE
 BUILDING INSPECTIONS DEPARTMENT
 2 Town Square
 PO Box 97, Burnsville NC 28714
 (828) 682 2420**

APPLICATION FOR RESIDENTIAL PERMIT

PERMIT # _____

PIN # _____

Owners Name - Last:		First:	Phone #
Address:			Zip:
Project Street Address:			Utility Provider:
City:	State:	Zip:	Project Cost:
Subdivision:		Lot #	Elec. Cost:
Existing Use			
Proposed Use of Structure:			
Bdrms. Finished or Unfinished	# Baths:	# Other Rms:	# of Stories:

Type of Work: New <input type="checkbox"/>	Addition <input type="checkbox"/>	Renovation <input type="checkbox"/>	Reconstruction <input type="checkbox"/>
Basement: Finished <input type="checkbox"/>	Unfinished <input type="checkbox"/>	Porches: Front <input type="checkbox"/>	Side <input type="checkbox"/> Rear <input type="checkbox"/> Deck: <input type="checkbox"/> Side <input type="checkbox"/> Rear <input type="checkbox"/>
Garage: <input type="checkbox"/>	Fireplaces: Masonry <input type="checkbox"/>	Prefab <input type="checkbox"/>	Gas <input type="checkbox"/> Construction Power Pole: <input type="checkbox"/>
Plans: Print Copies Submitted <input type="checkbox"/>	MPU File Name*		

General Contractor:			License #
Street Address:			Phone #
City	State	Zip	Fax #
Contact Name:			Phone:
E-mail:			

Electrical Contractor:			License #
City	State	Zip	Phone #
E-mail:			

HVAC Contractor:			License #
City	State	Zip	Phone #
E-mail:			

Plumbing Contractor:			License #
City	State	Zip	Phone #
E-mail:			

Directions to Project: _____

Applicant/Owner/Agent Name:	Phone#
Signature:	Date:

***** FOR OFFICE USE ONLY --- DO NOT COMPLETE *****

Water Supply: Public <input type="checkbox"/>	Private <input type="checkbox"/>	Waste Water: Public <input type="checkbox"/>	Private <input type="checkbox"/>	Lift Pump Required: <input type="checkbox"/>
Flood Certification Required: <input type="checkbox"/>	Imperv Surface Sq Ft	Finished Square Ft.		
Conditions of Permit:				

Cost Category	Fee	Cost Category	Fee	Cost Category	Fee
Electrical		Building		Other	
Heating		Footage Fees		Recovery Fund	
Plumbing		Const. Pole			

Plans Approved by: _____ Date: _____