

Development Services Customer Service Center

One Exchange Plaza, Suite 400 Raleigh, North Carolina 27601 Phone 919-516-2495 Fax 919-516-2685

Inspections Department Satellite Location 8320-130 Litchford Road, Raleigh North Carolina 27615

Phone 919-996-4200 Fax 919-713-4221

Permit Application

FOR C	OFFICE USE ONLY	Transaction Number		Group Number			
North Carolina State	Building Code 2012 200	9 North Carolina Rehab Code	2009 Residential	Commercial Express Review			
Applicant				Date			
Subdivision/Tenant	/Shopping Center			Lot Number			
Property Owner			Phone	Fax			
Owner/Agent Signa	ture		Email				
Project Contact Per	con: Chric Fortunes		Phone 919-469-9900	Fax			
	John Simb Fortunes		mailevergreen@nc.rr.com				
Irrigation Installatio	n						
WILL IMPERVIOUS S	SURFACE CHANGE? Yes	No If yes, has this impervious change: Increase (+	surface change been inclu sq. ft.) or Decrease (-	ded on the prior permit application? Yes No			
BUILDING							
Other Permits Issue	d Irrigation	Land Disturbing Permit	#	Wake Co. Well/Septic Permit #			
Contractor F Ve	alech Companie	NC License #/Class	907	City Business License #			
Address ////5	US Highway 62	TEast	City/State/Zip A				
Phone	as ingining .	Fax	Email	ica / Ne / a/Sas			
Total Project Sq. Ft.			Total Project Cost				
Utilities	Water Public Private	Sewer Public Private					
ELECTRICAL	Trace Trivate	Sewell abile — Trivate					
Contractor		NC License #/Class		City Dusings Linears H			
Address		INC LICEIISE #/ Class	City/State/Zip	City Business License #			
Phone		Fax	Email Email				
Voltage	Г П		Ellidii	Tetal Flactuical Cont			
	50 or less 600 or less	over 600 🗆		Total Electrical Cost			
PLUMBING	ak II Di Jai		0000				
Contractor Ha	SKell Hymbi	NC License #/Class	9337	City Business License #			
Address 109	Torked time	7		City/State/Zip Chapel Hill / NC / 27517			
	69-6323	Fax	Email	•			
Contractor (NFPA 13	su kes Sprinkiers)	NC License #/Class	T = 1-	City Business License #			
Address		1-	City/State/Zip				
Phone		Fax	Email				
MECHANICAL							
Contractor (HVAC)		NC License #/Class		City Business License #			
Address	T _F		City/State/Zip				
Phone Type of Heating	Fax		Email				
Work Includes		Electrical Gas Hot Water Oil Air Condition Size in Tons Appliances Appliance/Duct Ventilation Refrigeration Fuel Piping					
			geration L Fuel Piping L				
Contractor (Refrige	ration)	NC License #/Class		City Business License #			
Address			City/State/Zip				
Phone	Fax		Email				
Contractor (Hood)		NC License #/Class	Cit	y Business License #			
Address			City/State/Zip				
Phone	Fax		Email				
FIRE							
Contractor (Comme	ercial Sprinklers)	NC License #/Class		City Business License #			
Address			City/State/Zip				
Phone Fax			Email				
 Proportional PLANT MARKET AGGREGATION AND ARROWS PROPERTY AND ARROWS PROP							
Type of System	Fire Pump Standpipe	□ Sprinkler □					
Type of System Contractor (Fire Ala	A	Sprinkler NC Electrical License #/		City Business License #			

Address				City/State/Zip	City/State/Zip					
Phone		Fax		Email	Email					
Contractor (Fire Suppression)		•	NC License #/Class		City Business License #					
Address				City/State/Zip						
Phone			Fax	Email						
Contractor (Other) NC License #/Class					City Business License #					
Address			City/State/Zip							
Phone Fax			Email							
Does business store	e or use Haza	ardous Materials? Yes	□ No □ If yes, subm	nit Hazardous Materials Pern	nit Application					
Type of System SIGN	100	ed Gas Storage B		Spraying/Dipping Flam		ole Liquids Industrial Ovens				
Contractor				City Pusiness License	City Duning and Lineary H					
Address					City Business License #					
		I Fav.	City/State/Zip							
Phone Tuno of Sign	1	Fax		Email						
Type of Sign			off Premise Wall Wall Wall Wall Wall Wall		Ground Awning Projecting Special Events Other					
Business Owner			Address		City/State/Zip					
Phone	Phone			Email						
ZONING										
Contractor			Address		City/State/	Zip				
Phone		Fax		Email						
Type of Work		Structure Open	Fence Dish Antenn	a Parking Lot Site	Plan Tree C	Conservation Landscaping				
LAND DISTURBING										
Contractor				City Business License	City Business License #					
Address				City/State/Zip						
Phone Fax		Fax		Email						
Type of Grading	Mass Gra	ding (no improvement	s) Fine Grading	Construction Cost		Total Disturbed Area				
FACILITY FEE		amb (no improvement	5) Thie Grading							
Name of Payer										
Address				City/State/7in	City/State/Zip					
		Fax	9.365 F. S. T. S. T. S. G.	Email						
FLOOD				Lindi						
Contractor	A THE STATE OF		NC License #/Class		City Busine	es Liconso #				
Address			THE Electrise my class	City/State/7in	City Business License #					
Phone		Fax			Email					
RIGHT-OF-WAY		Tun		Lillali						
Contractor				City Business License #	City Business License #					
Address				City/State/Zip						
		Fax		Email						
For Driveway Number to be installed For Maintenance Purpose For Construction Purpose				For Sidewalk U Total Linear Feet Certificate of Eligibility #						
UTILITY	a. pose	1 or constru	and rurpose —							
Contact Person		* * * * * * * * * * * * * * * * * * * *		7						
		Owner Renter		Individual Meter Master Meter						
Phone Fax		Fax	Email							
			Water Size			Sewer Size				
			Property		Residential Non-Residentia					
Type of Service Water □ S SOLID WASTE SERVICES			wer Irrigation	Type of Meter		New Meter Split Meter Size of Meter				
Contact Person				Email	Fmail					
Phone				Fax						
Solid Waste/Recycling Number of Units			Public Private							
Number of Offics				Public — Private —	Public → Private →					