



# BUILDING PERMIT APPLICATION

Town of Black Mountain  
160 Midland Avenue  
Black Mountain, N.C. 28711  
Phone: 828-419-9300 Fax: 828-669-2030

**PERMIT #:** \_\_\_\_\_  
( ) Residential  
( ) Commercial  
( ) Flood Zone  
Elevation: \_\_\_\_\_

Owner Name: \_\_\_\_\_ Owner Phone #: \_\_\_\_\_  
Owner Address: \_\_\_\_\_

**Project Address:** \_\_\_\_\_ **PIN #:** \_\_\_\_\_

**Please attach if applicable:**

- \* Two (2) sets of plans
- \* Site Plan
- \* Progress Energy Premise #: \_\_\_\_\_
- \* Septic Permit/MSD Permit
- \* LEED or Healthy Built Home Certified
- \* Stormwater Control Plan
- \* Boundary Line
- \* Elevation Certificate
- \* Sedimentation/Erosion Control Permit
- \* Architectural Site Review
- \* Prior to final inspection, house numbers must be attached to outside of house and visible from street

Zone	Type Building	Min. Lot Area	SETBACKS			Max. Ht.	REMARKS
			Front	Rear	Side		
( ) R-20							
( ) R-10							
( ) O-1							
( ) C-1							
( ) C-2							
( ) C-3							
( ) I-1							
( ) I-2							
( ) F-1							
( ) TND							
( ) WPO							

Signed \_\_\_\_\_ Zoning Administrator

**Areas:**

Total Heated Sq. Ft. \_\_\_\_\_  
Covered Unheated: \_\_\_\_\_  
Open Decks: \_\_\_\_\_  
Concrete/Asphalt: \_\_\_\_\_  
Area of Land Disturbed: \_\_\_\_\_

**Project Cost:** \$ \_\_\_\_\_

Accommodations: \_\_\_\_\_  
Bedrooms: \_\_\_\_\_ Baths: \_\_\_\_\_  
Kitchen: \_\_\_\_\_ No. of Stories: \_\_\_\_\_

**Brief Description of Job:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FEES:**

Building: \_\_\_\_\_ HR (Fund): \_\_\_\_\_ Other: \_\_\_\_\_  
Plumbing: \_\_\_\_\_ Cert. of Occupancy: \_\_\_\_\_  
Mechanical: \_\_\_\_\_ Fire/Sprinkler: \_\_\_\_\_ Total Fees: \_\_\_\_\_  
Electrical: \_\_\_\_\_ Gas: \_\_\_\_\_ Cash: \_\_\_\_\_ Check #: \_\_\_\_\_  
Zoning: \_\_\_\_\_ Stormwater: \_\_\_\_\_

**\*A Final Inspection Must Be Scheduled Prior to Completion of Project\***  
**To Schedule an Inspection, please call 419-9300 ext. 373.**

## CERTIFICATION

I (We) agree to conform to all Federal, State and local codes and ordinances. All materials will be kept presentable on the lot and all debris will be removed prior to issuance of a Certificate of Occupancy.

DATE: \_\_\_\_\_ SIGNED BY: \_\_\_\_\_ OWNER

DATE: \_\_\_\_\_ SIGNED BY: \_\_\_\_\_ CONTRACTOR

**PERMIT APPROVAL DATE:** \_\_\_\_\_ **BUILDING OFFICIAL:** \_\_\_\_\_

NOTE: If the work has not been started within six (6) months of permit issuance date, or the work has been ceased for twelve (12) months, the permit will become void and all fees will be surrendered.

## SPECIFICATIONS

**FOUNDATIONS**

- Concrete Block
- Poured Wall
- Slab on Grade
- Other \_\_\_\_\_

**WALLS**

- Wood Siding
- Vinyl Siding
- Stucco
- Other \_\_\_\_\_

**SUB-FLOORING**

- Diagonal
- Plywood (T&G)

**FLOORING**

- Hardwood
- Tile
- Vinyl
- Carpet

**ROOFING**

- Fiberglass
- Wood
- Metal
- Other \_\_\_\_\_

**HEATING & AIR CONDITIONING**

- none       Elect. Resist
- Heat Pump    Central Air
- Fireplace    Window Units

**PLUMBING FIXTURES:** Give number of:

- Lavatories    Closets    Sinks
- Tub/Showers    Water Heaters

Gas Appliances: List appliances & BTU demands. (If gas installed for other than fireplaces, detailed schematic required)

\_\_\_\_\_

\_\_\_\_\_

Concrete:  Under House       Driveway       Other \_\_\_\_\_

Insulation	Type	Thickness	R-Factor
Exterior Wall			
Ceiling			
Floor			

**Contractor Information**

	Phone #	State License #	BM Priv. Lic. #
1. General Contractor			
2. Electrical Contractor			
3. Mechanical Contractor			
4. Plumbing Contractor			
5. Other			

**IMPORTANT NOTICE:**

Construction site must be kept clean and presentable at all times. Do not allow debris to blow on adjacent properties, roads, streams, etc. A **“STOP WORK ORDER”** will be issued for violations and a penalty will be assessed. **Contractor must remove all construction advertisement signs within 30 days upon completion of said job.**