

**NEW HANOVER COUNTY
DEPARTMENT OF BUILDING SAFETY
230 Government Center Dr. Suite 170
Telephone (910) 798-7308
Fax (910) 798-7811**

Nicholas Gadzekpo
Director of Building Safety

*****IMPORTANT NOTICE*****

FOR COMPLETE ELECTRONIC PROJECT SUBMITTALS BY EMAIL

If you wish to submit your Commercial or Residential project electronically by email, please attach your electronic plans in the “pdf format along with your application” before clicking the send button.

FOR COMPLETE ELECTRONIC PROJECT SUBMITTALS IN PERSON

If you wish to submit your Commercial or Residential project in person on CD, please fill out the building permit application on line, print it, scan and put it on your CD along with the plans and Appendix B if applicable in the “pdf format” & bring your CD to the Development Services Center, located at 230 Government Center Drive; Suite 170.

If you have questions about the electronic submittal process, please call the Development Services Center at (910) 798-7308.

Please note that we except Cash, Checks, and Credit Cards (American Express, Discover, VISA, and MasterCard).

Thank you.

NEW HANOVER COUNTY BUILDING PERMIT

APPLICATION TYPE: MECHANICAL

PLEASE ANSWER ALL QUESTIONS APPLICABLE TO YOUR PROJECT

"Project Responsibility"

APPLICATION
Number

(Office Use)

APPLICANT'S NAME: _____ DATE: _____

PROJECT ADDRESS: _____ CITY: _____ ZIP: _____

OCCUPANT/BUSINESS NAME: _____

PROPERTY OWNER'S NAME: _____ PHONE #: _____

OWNER'S ADDRESS: _____ CITY: _____ ST: _____ ZIP: _____

MECHANICAL CONTRACTOR: _____

ACCOUNT #: _____ NC STATE LICENSE #: _____ JOURNEYMAN LICENSE #: _____

ADDRESS: _____ CITY: _____ ST: _____ ZIP: _____

EMAIL ADDRESS: _____ PHONE #: _____

FAX #: _____

PROJECT CONTACT PERSON: _____ PHONE #: _____

DISCLAIMER: I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other applicable State and local laws and ordinances and regulations. The NHC Development Services Center will be notified of any changes in the approved plans and specifications or change in contractor or contractor information. ***NOTE: Any Work Performed W/O the Appropriate Permits will be in Violation of the NC State Bldg Code and Subject to Fines Up To \$500.00***

OWNER/CONTRACTOR: _____ SIGNATURE: _____
(Print Name)

TOTAL SQ FT OF BUILDING: _____ IS THE PROPERTY LOCATED IN A FLOODPLAIN? Yes No

NOTE: If the mechanical system(s) you are permitting serves only a small portion and not the entire building, put the square footage of the small area it serves. The square footage is not required if you are only changing out a single component of a system.

IF BLDG PROJECT - PERMIT NUMBER: _____ IS FOOD PREPARED IN THIS BLDG Yes No

NOTE: If you have the Project Permit Number you need not fill out the Owners Name, Address or Phone Number.

IS YOUR PROJECT: RESIDENTIAL (House, Duplex or Townhome) OR COMMERCIAL (All other construction)
 New Construction Addition Alteration Existing Building

NOTE: Residential is defined as a single-family detached home, a duplex or up to a maximum of (8) attached Townhouses only! Commercial Projects are defined as Apartments, Condos, Offices and other Businesses.

IF COMMERCIAL, WHAT IS THE OCCUPANCY TYPE: Assembly Business Educational
 Factory/Industrial Hazardous Institutional Mercantile Residential Storage

Please CHECK below next to the description of work that you are doing. Please use the space below in (Details) to better describe your scope of work including all work which requires a mechanical permit. If applicable, please enter the total number of fixtures you are installing or replacing in the bldg.

- | | |
|--|---|
| <input type="checkbox"/> Install New Mechanical System | <input type="checkbox"/> Install New Gas System |
| <input type="checkbox"/> Replace Mechanical System | <input type="checkbox"/> Replace Gas System |
| <input type="checkbox"/> Add/Alter Mechanical System | <input type="checkbox"/> Chg Out(1) Component of Gas System |
| <input type="checkbox"/> Chg Out(1) Component of Mech System | <input type="checkbox"/> Install New Refrigeration System |
| <input type="checkbox"/> Change Out Ductwork only | <input type="checkbox"/> Replace Refrigeration System |
| <input type="checkbox"/> Split System | <input type="checkbox"/> Chg Out(1) Component of Refrigeration System |
| <input type="checkbox"/> Package System | |

PLEASE GIVE DETAILED SCOPE OF WORK IN SECTION BELOW

SPECIFIC DETAILS:

I am installing a TOTAL of: _____ SYSTEM(S) _____ TONS
_____ KW'S _____ BTU's OF HEAT (gas/oil)

*** SEPARATE PERMITS REQUIRED FOR ELECT, MECH, PLBG, GAS EQUIP, PREFABS & INSERTS ***

PAYMENT METHOD: CASH CHECK (PAYABLE TO NHC) BILL ACCOUNT MC/VISA DISCOVER AMERICAN EXPRESS

Comment: _____ PERMIT FEE: \$ _____

*DISCLAIMER: SUBMITTING THIS APPLICATION MEANS THAT THE SUBMITTAL CHARGE IS NON-REFUNDABLE