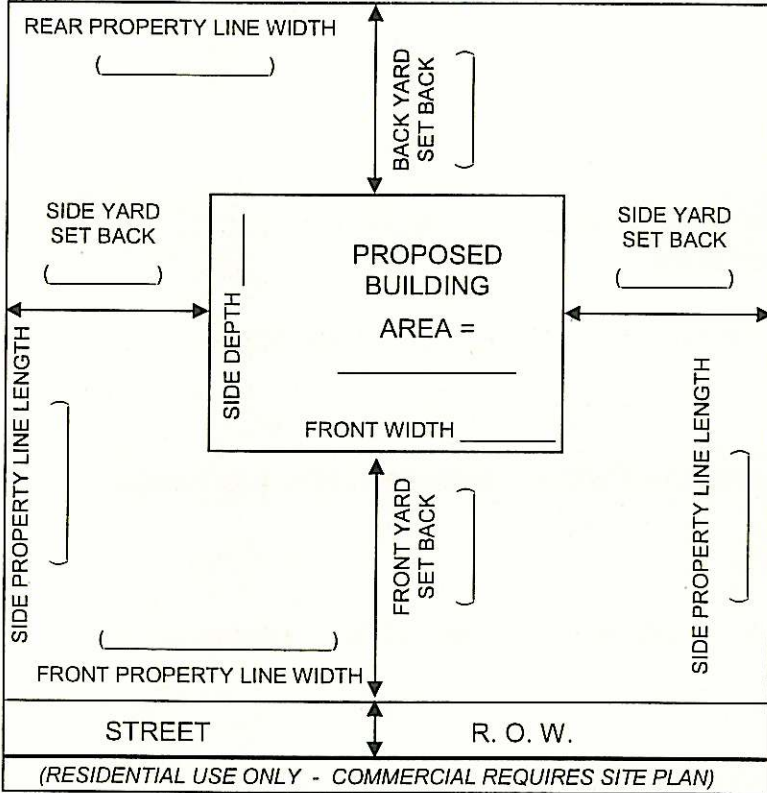


CITY OF THOMASVILLE — BUILDING PERMIT APPLICATION

Property Owner _____ Date ____/____/____
 Job Site Address _____ Subdivision _____ Lot No. _____
 Occupancy Group _____ Type of Building _____ New _____ Existing _____ Addition _____ Upfit _____
 Type of Construction _____ I _____ II _____ III _____ IV _____ V / _____ A or _____ B
 Property Use _____ Single Family _____ Duplex _____ Apartments _____ Condominium _____ Town Home _____ Other _____
 Building Height _____ No. of Stories _____ No. of Dwelling Units Proposed _____



Building Area Square Footage:

Porch _____ / Deck _____
 Garage _____ / Bonus Room _____
 Basement: Unfinished _____ Finished _____
 Unheated Sq. Ft. _____
 Heated Sq. Ft. _____
 Total Sq. Ft. _____

(For Office Use Only—To Be Completed by Inspections Dept.)

| | COST | FEES |
|---------------------------|----------|----------|
| BUILDING..... | \$ _____ | \$ _____ |
| ZONING..... | | \$ _____ |
| NC RECOVERY..... | | \$ _____ |
| TOTALS..... | | \$ _____ |
| BUILDING PERMIT NO. _____ | | |

Insulation Values: Wall _____ Ceiling _____ Floor _____

| | <u>MATERIAL</u> | <u>SIZE</u> | <u>SPAN</u> | <u>O.C.</u> |
|-----------------|-----------------|-------------------------|-------------|-------------|
| Footings | _____ (psi) | depth _____ width _____ | N/A | N/A |
| Foundation Wall | _____ | _____ | N/A | N/A |
| Roof Rafters | _____ | _____ | _____ | _____ |
| Floor Joists | _____ | _____ | _____ | _____ |
| Ceiling Joists | _____ | _____ | _____ | _____ |
| Wall Studs | _____ | _____ | N/A | _____ |
| Girders | _____ | _____ | _____ | N/A |

Contractor Name _____ License No. _____ Classification _____
 Address _____ City _____ State _____ Zip _____
 Telephone _____ Ext _____ Fax _____ Mobile _____
 Design Professional _____ Telephone _____ Fax _____
 Architect Engineer NC Reg. No. _____ Owner Other _____
 Address _____ City _____ State _____ Zip _____

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 Inspection Department will be notified of any changes in the approved plans and specifications for the project permitted herein.

Owner / Licensed Contractor Signature _____