



# TOWN OF SOUTHERN SHORES RESIDENTIAL BUILDING PERMIT APPLICATION FORM

**NOTE:** Although the Town of Southern Shores does not enforce or consider the effect of covenants in the various subdivisions of Southern Shores, applicants for a building permit should be advised that their building plans may be affected by subdivision covenants and are advised to consult with the appropriate property owners' association.

*You are strongly urged to obtain approval from the appropriate association before you apply for a permit and begin construction. Failure to do so could result in legal action by the association to enforce the covenants.*

APPLICANT NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

TOTAL ESTIMATED PROJECT COST: \_\_\_\_\_ Flood Zone \_\_\_\_\_

PROJECT ADDRESS: \_\_\_\_\_ PIN \_\_\_\_\_

SUBDIVISION, LOT #, BLOCK #, SEC. #: \_\_\_\_\_

DEVELOPER \_\_\_\_\_ PHONE: \_\_\_\_\_

PROPERTY OWNER: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

### Description of work to be done:

TYPE OF CONSTRUCTION: \_\_\_\_\_ NEW \_\_\_\_\_ EXISTING \_\_\_\_\_ ADDITION \_\_\_\_\_ N/A

EQUIPMENT: \_\_\_\_\_ NEW \_\_\_\_\_ EXISTING \_\_\_\_\_ ADDITION \_\_\_\_\_ N/A

PROPERTY USE: \_\_\_\_\_ SINGLE FAMILY \_\_\_\_\_ TWO FAMILY \_\_\_\_\_ OTHER

BUILDING AREA: \_\_\_\_\_ CONDITIONED SPACE (NEW SPACE)

\_\_\_\_\_ UNCONDITIONED SPACE (NEW SPACE)

\_\_\_\_\_ REMODELING COST ONLY

BUILDING HEIGHT: \_\_\_\_\_ FEET \_\_\_\_\_ # OF STORIES

UTILITIES APPROVALS: \_\_\_\_\_ WATER \_\_\_\_\_ SEPTIC

\_\_\_\_\_ ACCESSORY BUILDING \_\_\_\_\_ SIZE

\_\_\_\_\_ FENCE \_\_\_\_\_ SWIMMING POOL \_\_\_\_\_ OTHER

### PERMIT FEES ARE BASED ON SQUARE FOOTAGE OF CONSTRUCTION AND/OR THE REMODELING COST:

CONDITIONED SPACE @ \$0.60 PER SQ FT

UNCONDITIONED SPACE @ \$0.30 PER SQ FT

REMODELING 2 \$10.00 PER \$1,000.00

SWIMMING POOLS/SHED/TENNIS COURTS ARE FLAT FEE

MINIMUM FEE OF PERMIT \$100.00

### FEES FOR THIS PROJECT:

SQUARE FOOTAGE \_\_\_\_\_

OTHER OR FLAT FEE \_\_\_\_\_

REMODELING \_\_\_\_\_

HOMEOWNERS RECOVERY \_\_\_\_\_

PLAN REVIEW \_\_\_\_\_

TOTAL FEE DUE \_\_\_\_\_

**PLACE X AND COMPLETE ADDITIONAL INFORMATION FOR EACH TRADE TO BE USED.**

\_\_\_\_\_ GENERAL CONSTRUCTION

CONTRACTOR NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

LICENSE # AND CLASSIFICATION \_\_\_\_\_

PHONE # \_\_\_\_\_ OFFICE \_\_\_\_\_ MOBILE \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

\_\_\_\_\_ ELECTRICAL

Licensee Name \_\_\_\_\_

NC License/Classification \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_

\_\_\_\_\_ PLUMBING

Licensee Name \_\_\_\_\_

NC License \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_

\_\_\_\_\_ GAS

Licensee Name \_\_\_\_\_

NC License \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_

\_\_\_\_\_ MECHANICAL

Licensee Name \_\_\_\_\_

NC License \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Owner/Agent Signature \_\_\_\_\_

# Building Plan Checklist

## MUST BE COMPLETED AND RETURNED WITH APPLICATION IF APPLICABLE

- ❖ (2) complete sets of building plans showing
  - ❖ elevation views from all sides
  - ❖ foundation, floor and roof plans and framing members layout (engineered plans may be required)
  - ❖ typical wall section showing insulation and high wind zone tie down details
  - ❖ overall building height \_\_\_\_\_
  - ❖ top plate height \_\_\_\_\_
  - ❖ mean roof height \_\_\_\_\_ minimum Design Pressure (DP) rating \_\_\_\_\_
  - ❖ Window, Exterior and Garage Door Schedule with egress sizes and DP rating shown
- ❖ (1) Site plan showing any changes in layout, drawn to scale

### **Circle or fill in blank if applicable**

- ❖ Type of foundation: [pile, block, monolithic slab]
- ❖ Number of bedrooms \_\_\_\_\_ #Occupants) \_\_\_\_\_
- ❖ Number of bathrooms \_\_\_\_\_ Full \_\_\_\_\_ Half \_\_\_\_\_
- ❖ inside wall finish \_\_\_\_\_ outside wall finish \_\_\_\_\_
- ❖ roof type [asphalt, metal, wood shake] other \_\_\_\_\_
- ❖ insulation type [batt, blown] other \_\_\_\_\_
- ❖ primary heat type [heat pump or other type] \_\_\_\_\_
- ❖ A/C type [electric heat pump or central or other] \_\_\_\_\_