



TOWN OF BEECH MOUNTAIN
Application for Building and Repair Permit
 Town of Beech Mountain Dept. of Planning and Inspections
 403 Beech Mountain Parkway (Town Hall- Second Floor)
 (828) 387-4236 or inspector@townofbeechmountain.com



Applicant Name: _____ **Date:** _____

Job Address: _____ **Project Cost:** _____

Property Owner: _____ **Phone:** _____

Owner Address: _____ **City, State, Zip:** _____

Type of Work: New _____ Renovation _____ Addition _____ Deck _____ Repair _____

FOR ZONING PURPOSES: Please select the proposed use of the property for which this permit is sought:

Residential Single Family: _____ Residential Multi-Family/ Condo: _____ Commercial/ Business: _____

Residential Vacation Rental of 6 bedrooms or more: _____ (note: Residential Vacation Rentals of 5 bedrooms or less are considered Single Family dwellings)

Other (describe): _____

Description of Work: _____

Does the work include the installation of exterior lighting fixtures? Yes No

Size of work in Sq. Ft.: Heated: _____ Unheated: _____ Deck: _____ Roof: _____
 Other: _____

Utilities:

Water: Public _____ Private _____ Health Department Approval # _____

Sewer: Public _____ Private _____ Health Department Approval # _____

Fees:

- Permit Heated _____
- Permit Unheated _____
- Homeowner Recovery Fund _____
- Connection Fee Water _____
- Connection Fee Sewer _____
- Tap Fee Water _____
- Tap Fee Sewer _____
- Pavement Cut _____
- Decks _____
- Roofs _____
- Other _____
- Other _____
- Total** _____

Please attach a sketch of your plan to this application. If engineering is required you will need to submit plans for review.

All required plans must remain on site at all times. No inspection will be performed if required plans are not on site.



**TOWN OF BEECH MOUNTAIN
REGULATIONS SHEET FOR APPLICABLE CONTRACTORS**

Town of Beech Mountain Dept. of Planning and Inspections
403 Beech Mountain Parkway (Town Hall- Second Floor)
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General Contractor

Contractor: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____
e-mail: _____
License #: _____
Classification: _____
Expiration: _____

Electrician

Contractor: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____
e-mail: _____
License #: _____
Classification: _____
Expiration: _____

Plumber

Contractor: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____
e-mail: _____
License #: _____
Classification: _____
Expiration: _____

Mechanical/ HVAC/ Fuel Gas

Contractor: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____
e-mail: _____
License #: _____
Classification: _____
Expiration: _____

Architect/ Engineer

Company: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____
e-mail: _____
NC Reg. #: _____
Classification: _____
Expiration: _____

Unlicensed Builder or Owner/Builder

Contractor: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____
e-mail: _____

I hereby certify that all information in this application is correct, and all work will comply with the State of North Carolina and the Town of Beech Mountain laws, ordinances, and regulations. I further certify that all work requiring a licensed contractor will be accomplished by those listed above. The Inspections Department will be notified of any changes in the approved plans and specifications or personnel for the project permitted herein.

Signature/Date: _____

Owner: _____ **Contractor:** _____

Office Use Only- Zoning Compliance

NOTE: For new structures, refer to the separate Zoning Permit application for approval prior to issuance of a Building Permit.

A Certificate of Zoning Compliance is hereby GRANTED DENIED (provide reason on attached sheet)

Signature/Date: _____