

LENOIR COUNTY PLANNING & INSPECTIONS

101 N. Queen Street
P.O. Box 3289
Kinston, N.C. 28502

Phone: (252) 559-2260
Fax: (252) 559-2261

BUILDING PERMIT APPLICATION

Project Name: _____
Project Address: _____
Tax ID # on Land: _____

Owner's Name: _____
Owner's Present Address: _____
Owner's Phone Number: _____

General Contractor's Name: _____
License # _____ Phone Number: _____

Description of Proposed Work:

Building Area: First Floor: _____ Second Floor: _____
Garage/Carport: _____ Porches/Decks: _____
Other: _____

Power Supplier: _____
Water Supplier: _____
Sewer: Public Utility Name: _____ Septic Tank # _____

Project Valuation: (total cost including plans, materials, labor, of all trades and services)
\$ _____

Directions to Project:

Signed: _____ Date: _____

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Certification as to Status of Licensure

Owner/Builder Must Sign:

I understand that I am signing this document under oath; I certify that I am making a truthful statement. I have entered into a construction project where the cost of the undertaking exceeds \$30,000.00. Per North Carolina General Statute 87-1, I am not allowing an unlicensed general contractor to perform the duties of a N.C. Licensed General Contractor. This includes construction superintending and managing in addition to, among other things, signing written contracts. I intend to retain the finished house (or other project) exclusively for my own use. I am not building a "speculation" project with the intention of selling the project once it is completed. I will occupy the property for at least one year (12 months) following the completion (issuance of a Certificate of Occupancy) of construction.

I understand that building a "speculation" project without proper licensure is a violation of North Carolina General Statute 87-1 and 87-13; this may be a criminal offense. Also, I understand that under North Carolina General Statute 87-15.5, the "Homeowners Recovery Fund": No Homeowner acting as a General Contractor (Owner/Builder) has any rights to recovery.

I have filled out the Worksheet/Affidavit regarding Workers Compensation and certify either that I am not required by law to carry such coverage or that I agree to submit certificates of insurance coverage upon demand by the Building Inspector. I understand that I am responsible for ascertaining whether I am obligated by law to obtain Workers Compensation Insurance and to assure that our insurance coverage is adequate. I have made all reasonable inquiries of the appropriate authorities and/or sought legal counsel to assure that I am providing all Workers Compensation coverage required by law.

Print Name: _____ **Phone:** _____

Sign: _____ **Date:** _____

Sworn to and subscribed to me this the _____ day of _____, 20__

Notary Public

My commission expires:

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WORKERS COMPENSATION INSURANCE COVERAGE

NC General Statute 87-14 requires you to have worker’s compensation coverage for workers on your project. If your project exceeds \$30,000.00 please provide a copy of your workers compensation insurance policy or complete the form below.

Affidavit of Workers Compensation Coverage

_____ (Officer of Agent of the Contractor or Owner) do hereby certify under penalties of perjury that the person(s), firm(s), or corporation(s) performing the work set forth in the permit:

_____ Have three or more employees and have obtained worker’s compensation insurance covering all employees on the job site.

_____ Have one or more subcontractors who have obtained worker’s compensation insurance covering all employees on the job site.

_____ Have not more than two employees and no subcontractors.

While working on the project for which this permit is sought, it is understood that the Lenoir County Planning & Inspection Department issuing the permit may require certificates of coverage and/or waivers of worker’s compensation insurance prior to issuance of the permit and at any time during the permitted work from any person, firm or corporation carrying out work on such project.

I hereby certify that all information in this application is correct and all work will comply with the NC State Building Codes and all other applicable state and local laws, ordinances and regulations. The Lenoir County Planning & Inspection Department will be notified of any changes in the approved plans and specifications for the project herein.

Print Name: _____ Phone: _____

Sign: _____ Date: _____

Sworn to and subscribed to me this the _____ day of _____, 20____.

Notary Public _____
My Commission expires: