



COUNTY OF PASQUOTANK

Building Inspectors Office

Post Office Box 39

Paul Kahl, Chief Building Inspector

Elizabeth City, NC 27909-0039

Phone (252) 338-1144 · Fax (252) 337-6733

Office Hours: 8:00 a.m. to 9:30 a.m. Monday-Friday

BUILDING PERMIT APPLICANT:

Each contractor is responsible for obtaining his or her own permit(s). The applicant shall submit **a floor plan** for the proposed construction. The floor plan must indicate accurate dimensions for the proposed construction and all rooms must be identified. A site plan shall accompany the floor plan. The **site plan** shall indicate property lines, existing and proposed buildings. The site plan shall also indicate set back dimensions from property lines and existing structures. The floor plan and site plan shall be legible and drawn to scale.

An **Application Worksheet**, provided by the Building Inspections Department, shall be completed by the licensed general contractor or building permit applicant. The **Application Worksheet** is to be used for all residential construction and accessory uses including remodeling, renovations, additions, attached/detached garages, decks, porches, workshops, and other accessory storage buildings.

The intended purpose of the **Application Worksheet** is to provide details for materials and construction of the proposed structure. It is not inclusive of all North Carolina State Building Code requirements. **The applicant/contractor will be responsible for construction meeting North Carolina State Building Code.**

The applicant listed below certifies that all information on this application is correct and hereby agrees to erect or alter subject building(s) in accordance with North Carolina State Building Code and any other applicable local ordinances. Construction approval shall be granted after the work has been inspected and found to comply with the above.

Call the Building Inspections Office at least one working day in advance for all inspection requests, except footings. No work shall be covered or concealed until inspected and approved by the Pasquotank County Building Inspections Department.

Building permit fee refunds are subject to Building Permit Fee Refund Policy effective 6-3-96.

The building permit expires within six months from the date of issuance unless construction has begun.

No furniture or personal belongings are permitted within the structure until all construction is complete, inspected, approved and a certificate of occupancy is issued.

Signature of Applicant: _____

Date: _____

APPLICATION WORKSHEET:

Use of New Structure _____ Height of New Structure _____

Address of New Construction _____

Parcel Identification Number _____
(Map/Block/Parcel)

Property Owner Name _____ / Owner phone number _____

Contractor Name _____ License Number _____

Business Name License is under _____

Est. Cost of Construction \$ _____

*****PLEASE FILL IN ALL AREAS THAT PERTAIN TO THE NEW CONSTRUCTION THAT YOU ARE APPLYING FOR*****

1 story _____ 1.5 story _____ 2 story _____ 3 story _____

Total sq. ft. of new construction to include: porches, decks, heated space, and garages. _____

Total sq. ft. of new construction heated space. _____ / T-Pole Needed? _____ Yes _____ No

Exterior Siding: brick veneer _____ vinyl/aluminum siding _____ wood _____ EIFS _____ Other _____

1. **Foundation:** continuous _____ pier-curtain-wall _____ slab _____
trench footing size _____ X _____ deep
pier footing size _____ X _____ X _____ deep
anchor type _____ spacing _____
block size _____ X _____ X _____
cap block size _____ X _____ X _____
maximum pier height: _____
total # rows of piers _____

2. **Crawl Space:** access door size _____ X _____
Ground vapor barrier: Yes _____ No _____
of foundation wall vents _____
net free area per vent _____ sq. inches
total net free area of ventilation provided: _____ sq. inches

3. **Floor System:** double sheathing _____ or tongue & groove _____
1st floor girder size:
interior girders size _____, _____ X _____
with a _____ clear span
exterior girders size _____, _____ X _____
with a _____ clear span
1st floor joist size _____ X _____, _____ in. o.c.
with a _____ clear span
Species: Southern Pine _____ Spruce/Fir _____ Lumber grade _____
2nd floor joist size _____ X _____, _____ in o.c.
with a _____ clear span
Species: Southern Pine _____ Spruce/Fir _____ Lumber grade _____

4. **Ceilings:** Joist size _____ X _____, _____ in o.c. with a _____ clear span
Southern Pine _____ Spruce/Fir _____ Lumber grade _____
5. **Roof System:** Slope _____ / _____ Type: Gable _____ Hip _____ Other _____
Cathedral ceiling: Yes _____ No _____ Where _____
Trusses: Yes _____ No _____, _____ in o.c. with a _____ clear span
(If trusses are to be used, the truss specification sheets shall be provided to the inspector upon rough framing inspection.)
ridge board size _____ X _____
ridge beam size _____, _____ X _____ with a _____ clear span
rafter size: _____ X _____, _____ in o.c. with a _____ clear span
Species: Southern Pine _____ Spruce/Fir _____ Lumber grade _____
truss/rafter tiedown type _____ Uplift capacity _____

NOTE:

If all framing members (floor, ceiling joist and rafters) are not the same size, then all rooms shall be listed on the back of this sheet, specifying the above framing members, size, and clear spans of each room.

It shall be the responsibility of the builder to provide the inspection department load calculations, span tables, diagrams, or other information necessary to show construction compliance upon request. This includes headers, beams, girders, and/or other structural components.

6. **Type of Window :** _____ Design Pressure Rating _____

7. **Attic Area :** _____ square feet.
Attic access: Fixed stairs _____, Pull down _____,
Scuttle hole _____ size: _____ in. X _____ in.
Total net free area of attic ventilation provided _____ sq. in.
Roof vents: how many _____, net free area inches _____
Ridge vents: how long _____, size _____
Soffit vents: how many _____, net free area inches _____

8. **Garage :** Yes _____, No _____ Attached _____, Detached _____
Number of roll up doors _____, door width _____
Design pressure rating of doors _____
Finished room over garage: yes _____, no _____
Proposed use of room _____
Floor joist size: _____ X _____, _____ in. o.c., _____ clear span
Species: Southern Pine _____, Spruce/Fir _____, Grade _____

9. **Fireplace :** Yes _____, No _____ . Masonry _____, Manufactured/ Pre-fab _____
Fireplace opening _____ in. X _____ in.
Chimney height _____, Chimney flue size _____ X _____
Hearth extension: 16 in. _____, 20 in. _____, other _____ inches.
If masonry fireplace, Footing Size: _____ X _____ X _____ in. deep
Cricket: yes _____, no _____
Location of fireplace: _____
Number of fireplaces: _____.

NOTE: If more than one fireplace, please duplicate above information on the back of this sheet.

10. **Wood Deck :** Yes _____, No _____ Dimensions: _____ X _____

Height above grade: _____

Attached _____, Free standing _____

Girder size: _____, _____ X _____ with a _____ clear span

Post size : _____ X _____, How many _____

Floor joist size: _____ X _____, _____ in. o.c., with a _____ clear span

11. **Detached Accessory Building :** Yes _____ No _____

Dimensions: _____ X _____

Floor type: concrete slab _____, wood _____

Concrete footing: _____ deep X _____ wide,
_____ inches above adjacent grade.

Anchor size: _____ X _____ long , spacing: _____ apart.

Masonry foundation: Yes _____, No _____

If yes, give size: _____, X _____ high

Number of wood skids: _____. Size: ____ X ____ X ____ long

Floor joist size: ____ X _____, _____ in. o.c.

With a _____ clear span.

Number of anchors: _____

Size / type of anchors: _____

{ these anchors must resist uplift / overturning with a capacity
of 20 pounds per square foot of floor area }

Applicant: _____

Date: _____

Contact phone number: _____

Reviewed by: _____

Date: _____