

TOWN OF LAKE WACCAMAW INSPECTIONS DEPT.

205 Flemington Dr. Lake Waccamaw North Carolina 28450
Office 910-646-3700 Fax: (910) 646-3860 Monday to Friday 8:00 to 5:00

BUILDING PERMIT APPLICATION

Property I.D. # _____ Township # _____ Flood Area: Yes _____ No _____

Owner : _____ Phone #: _____

Address: _____

City State Zip Code

Contractor: _____ Phone #: _____

Address: _____

City State Zip Code

N. C. General Contractors License # : _____ Project Cost : \$ _____

Location Of Work: _____

POWER CO.--- BWE _____ 4CO. _____ PGE _____ PREM. # _____

Description of work: _____

Building Use: Assembly _____ Business _____ Educational _____ Factory-Industrial _____
Hazard _____ Institutional _____ Mercantile _____ Residential _____ Storage _____ Other _____

Construction Type: I _____ II _____ III _____ IV _____ V _____

Description Of Building Use: _____

Type Of Construction: New _____ Addition _____ Remodel _____ Modular _____ Moved House _____

Bonus Room: Finished _____ Crawl Space: _____ Slab: _____

Heated Area: _____ sq. ft. Unheated Area: _____ sq. ft. (unheated area shall include garage, front and back porch, deck, unfinished bonus room, detached garage and storage buildings)

Building Height: _____ No. Of Stories: _____ Area Per Floor: _____ sq. ft.

Owner, Contractor, Agent Agreement;

I do hereby certify that all information in this application is correct and that all work will comply with the International Building / Residential Code for the State of North Carolina and all other State and Local Codes. In the event that changes are made different than this application I will notify the Columbus County Inspections department.

Owner, Contractor, Agent

Date Of Application

Building Inspector

Date Approved

Call (910) 640-6619 ext. 1 or 0 To Schedule All Inspections

Closed 12:00 pm To 1:00 pm

All Permits Expire Within 6 Months From Date Of Issuance If An Inspection Has Not Been Made.