

TOWN OF LAKE WACCAMAW INSPECTIONS DEPT.

P.O. Box 145, Lake Waccamaw, North Carolina
(910) 646-3700 Fax : (910) 646-3860 8:00 am to 5:00 pm Monday - Friday

BUILDING PERMIT APPLICATION

Property I.D. # _____ Flood Area: Yes _____ No _____ Flood Insurance Rate Map # _____
Zoning District _____

Owner : _____ Phone #: _____

Address: _____
City State Zip Code

Contractor: _____ Phone #: _____

Address: _____
City State Zip Code

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

Location Of Work: _____

Type of structure:

Hazard _____ Institutional _____ Mercantile _____ Residential _____ Storage _____ Other _____

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: _____

OFFICE USE ONLY

Water and Sewer Approved? Yes _____ No _____ By: _____

Zoning Permit Approved? Yes _____ No _____ By: _____

Referred to Board of Adjustment? Yes _____ No _____

Decision from Board of Adjustment _____

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 Lake Waccamaw Inspections department.

Owner, Contractor, Agent

Date Of Application

Building Inspector

Date Approved

