



TOWN OF FOREST CITY
Building and Zoning Department

*P.O. Box 728, 128 North Powell Street
Forest City, North Carolina 28043
Phone: 828-248-5239
Fax: 828-245-6143*

PERMIT APPLICATION

Date _____

Job Address _____

Owner _____

Permit Type: Electrical____ Mechanical____ Plumbing____ Fire Protection____

Job Cost _____ **(We must have an estimated cost to issue a permit)**

(Permit fees are based on \$2.50 per thousand dollars of job cost, with a minimum fee of \$50.00)

If Appliance/Equipment installation:

Wiring: Reconnect____ New____

Gas Piping: Reconnect____ New____

Contractor _____ License # _____

Address _____

Contact Person _____ Phone # _____

Other Contractor _____ License # _____

Description of work _____

***Estimated Date of Completion _____ ***

Applicant _____ Date _____

**An additional \$50.00 fee may apply for inaccessibility at time of inspection;
scheduled inspections that are not ready; and re-inspections of the same violation**

***See our website for a complete fee schedule @townofforestcity.com**