

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_____ City/State/Zip_____

Contact Person_____ Phone #_____

Other Contractor_____ License #_____

Description of work_____

*****INSPECTIONS ARE REQUIRED TO BE SCHEDULED 24 HOURS IN ADVANCE*****

*****AFTER THE JOB IS COMPLETE, CONTRACTOR HAS 10 DAYS TO SCHEDULE A FINAL INSPECTION*****

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**