



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)

***(Minimum Charge is \$50.00 for job cost less than \$20,000.00,
Charge for job cost over \$20,000.00 is \$2.50 per \$1000.00)***

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 _____