



Insulation Permit Application
 Development Services
www.fayettevillenc.gov
 433 Hay Street Fayetteville, NC 28301
 Phone (910) 433-1707 Fax (910) 433-1588

Notes: Please fill out application COMPLETELY – Failure to do so will delay processing – Thank you

1. Depending on the type of improvement or development proposed, separate permits may be required for building, electrical, mechanical, insulation, low-voltage electrical, or plumbing work.
2. All required performance guarantees must be approved by the City prior to issuance of a permit.
3. Insulation permits shall not be issued unless the proposed development complies with all requirements in the City Code.

1. Project Location:

Project Address:		Project Name:	
Parcel Identification Number:	Zoning Classification:	Corner Lot: <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Contractor Information:

Company Name:		Telephone #:	
Address:		E-mail:	
City/State/Zip:			
NC State License Number:	Classification:	Limitation:	
Company Affiliation: <input type="checkbox"/> Owner – Name: _____ <input type="checkbox"/> Employee Name: _____			

Unlicensed Contractors: As an unlicensed contractor, I am aware that I cannot enter into a contract that the total amount of the project exceeds \$30,000.00 Signature _____

3. Owner Information:

Name:		Telephone #:	
Mailing Address:		E-mail:	
City/State/Zip:			

4. Description of work:

Insulation Project Information			
Roof insulation R-Value:	Wall Insulation R-Value:	Other Insulation R-Value:	
Commercial <input type="checkbox"/>	Residential <input type="checkbox"/>	New <input type="checkbox"/>	Existing <input type="checkbox"/>
Brief description of job: _____			
Square Footage of Structure:		Value of Improvement:	

5. Applicant's Signature & Authorization:

Permit Expiration: The permit will expire if no inspection occurs within the first six (6) months for each trade from the date the permit was issued. If an inspection has been done, the permit will expire 12 months from the date of the inspection.

I hereby certify that all information in this application is correct and all work will comply with the North Carolina State Residential Code and all other applicable state and local laws, ordinances and regulations. I understand that I am responsible for all work performed and the Inspections Department will be notified of any changes in the approved plans and specification for the projected permitted herein.

IF CONSTRUCTION IS PERFORMED BY THE OWNER WHO IS NOT A NORTH CAROLINA GENERAL CONTRACTOR: This is to certify that I, as the property owner, am presently occupying or will occupy the structure listed on this permit and this structure is not intended for rent, lease, or sale. I understand that I am totally responsible for all work performed per § GS 87-14. Any work over \$30,000 will require a separate notarized affidavit.

Signature of Owner/Agent/Contractor	Printed Name	Date						
<table style="width: 100%; border-collapse: collapse;"> <tr> <td>Zoning Administrator: _____</td> <td>Date: ____/____/20__</td> </tr> <tr> <td>Building Inspector: _____</td> <td>Date: ____/____/20__</td> </tr> <tr> <td>Permit Fee: _____ Permit Number: _____</td> <td>Date: ____/____/20__</td> </tr> </table>			Zoning Administrator: _____	Date: ____/____/20__	Building Inspector: _____	Date: ____/____/20__	Permit Fee: _____ Permit Number: _____	Date: ____/____/20__
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