All Required Documents Must be Submitted together or Applications Missing Required Documents Will Be Returned.

Application Submission Instructions: Residential Demolition

- Residential Building Permit Application
- License Check & Regulation Sheet for each applicable contractor including General Contractor
- Affidavit of Workers' Compensation Form ♦
- Erosion Control Certification Form
- Applicable Fees

Items with ♦ are not required for projects under $40,000

Additional permits such as Zoning, Watershed, Grading or Floodplain may be required

FEES:

See Fee Schedule

How To Submit:

In- Person

Or
Mailed with check to:
Watauga County Planning & Inspections
126 Poplar Grove Connector
Suite 201
Boone, NC 28607

Or
Emailed to p&i@watgov.org. You will be contacted with link to pay with credit card. Plans will have to be delivered to office.

Watauga County
Planning & Inspections
(828)265-8043 • p&i@watgov.org
www.wataugacounty.org

Residential Building Permit Application

Property Information

Date: _____ **Tax Parcel No.:**_____

Property Owner: _____
Mailing Address: _____Telephone #_____
Address of Job Site: _____
Job Site Directions: _____
_____

Site Details

Subdivision Name(if applicable): _____ Lot# _____ Acreage _____
Is Home Located Near a River or Stream: ☐Yes ☐ No If yes, Distance from Stream _____
Name of River of Stream _____ Will Driveway Cross Stream: ☐Yes ☐ No
Proposed Grading (area disturbed) including driveway & septic: _____ Length of Drive _____

Utilities

Power Company: ☐ Blue Ridge ☐ New River ☐ Mountain Electric
Sewer System: ☐ Septic Permit #_____ ☐ Community ☐ Public ☐ Existing (Setbacks Verified)
Water System: ☐ Well Permit #_____ ☐ Community ☐ Public ☐ Existing

Contractor Information

General Contractor: _____
Electrical Contractor: _____
Plumbing Contractor: _____
HVAC Contractor: _____
Fuel Piping Contractor: _____
Grading Contractor: _____

Primary Contact: _____
Telephone #:_____ Email: _____

Project Details

Permit Type: ☐ Single Family ☐ Duplex ☐ Townhome ☐ Accessory Structure ☐ Other _____
Type of Work: ☐ New ☐ Addition ☐ Remodel ☐ Repair ☐ Demolition ☐ Change of Use
Type of Construction: ☐ Frame ☐ Modular ☐ Log ☐ Timber Frame ☐ Other: _____
# of Stories _____ Height of Structure from Top of Foundation _____
Type of Heat: ☐ Gas Forced Air ☐ Heat Pump ☐ Boiler ☐ Electric ☐ Other _____
# of Bedrooms _____ # of Full Baths _____ # of Half Baths _____ Total Estimate Cost $ _____

Project Area

Finished Area (sq.ft.) 1st Floor _____ Basement (sq.ft.) Finished _____
2nd Floor _____ Unfinished: _____ Total Finished _____
Bonus Room _____ Garage (sq.ft.) _____ Total Unfinished:_____
Decks/Patios/Porches (sq.ft.) _____ ☐ Attached ☐ Detached ☐ Basement

The undersigned agrees to conform to all applicable laws of the County of Watauga and the State of North Carolina, and further states that all statements hereon are true. If subdivision lot, I certify that all structures, measured from the eaves, comply with setback requirements found in Watauga County's Planning & Development Ordinances.

_____ _____ _____
Name (Print) Signature Date

Watauga County
Planning & Inspections
(828)265-8043 • p&i@watgov.org
www.wataugacounty.org

Contractor License Check and Regulation Form

Property Information

Permit # _____

Property Owner: _____

Address of Job Site: _____

Subdivision/Lot #: _____

General Contractor: _____

Contractor Type

☐ General Contractor ☐ Electrical ☐ Plumbing ☐ Mechanical (HVAC) ☐ Fuel Piping
☐ Manufactured Home Dealer ☐ Manufactured Set-Up Contractor
☐Other: _____

Contractor Information

Licensed Contractor Name: _____

NC State License Number: _____

Business Name: _____

Business Address: _____

Business Telephone #:_____

Business Email: _____

Primary Contact: _____

Cell Phone #:_____ Email: _____

I the undersigned, have read and understand the North Carolina General Statues pertaining to licensed contractors. I hereby affirm or swear that I am a licensed and qualified to assume all responsibility and liability of a licensed contractor for this project. If I resign or am no longer affiliated with this project, I will notify the Department of Planning and Inspections in Watauga County immediately within three (3) business days.

_____	_____	_____
Licensed Contractor Name (Print)	Licensed Contractor Signature	Date

AFFIDAVIT OF WORKERS' COMPENSATION COVERAGE
N.C.G.S. § 87-14

The undersigned applicant for Building Permit # _____ being the

☐ Contractor

☐ Owner

☐ Officer/Agent of the Contractor or Owner

do hereby aver under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:

☐ has/have three (3) or more employees and have obtained workers' compensation insurance to cover them,

☐ has/have one or more subcontractor(s) and have obtained workers' compensation insurance covering them,

☐ has/have one or more subcontractor(s) who has/have their own policy of workmen's compensation covering themselves,

☐ has/have not more than two (2) employee and no subcontractors,

while working on the project for which this permit is sought. It is understood that the Inspection Department issuing the permit may require certificates of coverage of workers' compensation insurance prior to issuance of the permit and at any time during the permitted work from any person, firm or corporation carrying out the work.

Firm name: _____

By: _____

Title: _____

Date: _____

Watauga County Planning & Inspections
126 Poplar Grove Connector Suite 201
Boone, NC 28607
(828)265-8043 ● (828)265-8080 (fax)

Erosion Control Certification

The undersigned applicant for a Watauga County building permit acknowledges the following:

1. I am responsible for preventing off-site sedimentation during the course of my construction project;
2. Should off-site sedimentation occur as a result of my construction, I will cease construction until corrective actions are taken, to include prevention of further sedimentation and clean-up of any off-site damage;
3. I understand that failure to comply may result in withholding by the County of building inspections or issuance of a stop work order until compliance is achieved.

The preceding is pursuant to the Watauga County Erosion Control Ordinance and the NC Sedimentation Pollution Control Act of 1973.

Name:_____ Signature:_____

Date:_____ Tax parcel #:_____