



**COUNTY OF DUPLIN**  
 BUILDING INSPECTIONS DEPARTMENT  
 PO BOX 950  
 KENANSVILLE, NC 28349  
 PHONE: (910) 296-2124 FAX: (910) 296-2166

## Trade Permit Application

Property Owner	Telephone #
Project 911 Address	City
Parcel # of Property	Township
Contractor	License #
Contractor Address	City
Project Contact	Telephone #
<b>Occupancy Type:</b> Assembly <input type="checkbox"/> Business <input type="checkbox"/> Educational <input type="checkbox"/> Factory <input type="checkbox"/> Hazardous <input type="checkbox"/> Institutional <input type="checkbox"/> Mercantile <input type="checkbox"/> Storage <input type="checkbox"/> Utility <input type="checkbox"/>	Residential Apartments # _____ Single Family <input type="checkbox"/> Duplex <input type="checkbox"/>
Scope of Work:	If changing out Heat/ AC was the Ductwork replaced as well? _____ Is the ductwork located in attic _____ or crawl space _____. If located in an attic a ladder will be required for inspection.
<b>Electrical <input type="checkbox"/> Mechanical <input type="checkbox"/> Plumbing <input type="checkbox"/> Fuel Piping <input type="checkbox"/></b>	Cost of Construction \$ _____
Electrical Service Size _____ Amps; # Barns or Buildings _____; # _____ of Plumbing Fixtures; # _____ of Heat/AC Units	Septic Tank <input type="checkbox"/> Permit # _____ Public Sewer <input type="checkbox"/> _____

I hereby certify that all the information in this application is correct and all work will comply with the State Building Code and all other applicable State and local laws, ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specifications for the project permitted herein. If the property is in the Floodplain, an Elevation Certificate must be submitted prior to construction & that this is not an authorization to begin work. Work may only commence after approval and issuance of the permit. Failure to obtain a permit will result in a Stop Work Order and a \$150 fine will be assessed. Reinspection fees are charged at \$50 per trip.

**Applicant Signature** \_\_\_\_\_ **Date** \_\_\_\_\_