Permitting Instructions

1. You will need to apply for and receive approval from the Appalachian District Health Dept. They will help with all of your well and septic needs. Their number is 336-372-5641.

2. If your project is over $30,000 you will need to go to liensnc.com, set up an account, and appoint a lien agent. There are instructions on the web-site if you need assistance. You will need a valid credit card to go through this process. Print the page that says DO NOT REMOVE, PRINT AND POST. Without this paper you will not receive a permit from our office.

3. Fill out the application attached to your best knowledge.

4. If your structure is commercial, log or a modular you will need a full set of signed and sealed engineered plans that will be kept in the office.

5. Keep the very last page and post at the electrical panel for Final Inspection. If this is not posted you will not get a final.

If you have any question you may contact us by the information above.
STATE OF NORTH CAROLINA

COUNTY OF ____________________________

(Inspection Department)

Parcel Identification Number and address where the building is to be constructed: PIN _______________________

Address __________________________________________________________

Type of construction: □ Residential  □ Commercial  □ Industrial  □ Other

Intended use after completion (e.g. Personal residence): _____________________________________________

Building permit number associated with this application: _____________________________________________

I, __________________________________________________________ (_____)____________________

(Print Full Name) (Phone Number)

hereby claim exemption from licensure under G.S. 87-1(b)(2) by initialing the relevant provision in paragraph 1
and initialing paragraphs 2-5 below attesting to the following:

1. _____ I certify I am the owner of the property set forth above on which a building is to be constructed or
   altered and for which application for a building permit is hereby made;
   OR
   _____ I am legally authorized to act on behalf of the firm or corporation that is constructing or altering this
   building on the property owned by the firm or corporation as set forth above:

      ______________________________________________________
      ______________________________________________________

      (Name of Firm or Corporation)

2. _____ I will personally superintend and manage all aspects of the construction or alteration of the building
   and that duty will not be delegated to any person not duly licensed under the terms of Article 1, Chapter 87
   of the General Statutes of North Carolina.

3. _____ I will be on site regularly during construction and I will be personally present for all inspections required
   by the North Carolina State Building Code, unless the plans for the construction or alteration of the building were
   drawn and sealed by an architect licensed pursuant to Chapter 83A of the General Statutes of North Carolina.

4. _____ I understand that by executing this licensing exemption AFFIDAVIT pursuant to G.S. 87-1(b)(2), I am
   required by law to occupy the building for which the licensing exemption is granted for twelve months after
   completion, during which time it may not be offered for rent, lease or sale.

5. _____ I understand a copy of this AFFIDAVIT will be transmitted to the North Carolina Licensing Board for
   General Contractors for verification I am validly entitled to claim an exemption under G.S. 87-1(b)(2) for the
   building construction or alteration specified herein. I further understand if the North Carolina Licensing Board
   for General Contractors determines I am not entitled to claim this exemption the building permit issued for the
   construction or alteration specified herein shall be revoked pursuant to G.S 153A-362 or G.S. 160A-422.

   __________________________     ______________________________
   (Signature of Affiant)                                                                                  (Date)

   Sworn or affirmed and subscribed before me this the ______ day of ____________________________, 20_____

   ___________________________                                                                                   
   (Signature of Notary Public)                                                                                     (Notary Stamp or Seal)

   ___________________________                                                                                   
   (Printed Name of Notary Public)                                                                                   

(NOTE: It is a class F felony to willfully commit perjury in any affidavit taken pursuant to NC G.S. 14-209)
I do hereby certify that I will not employ more than two (2) people during the construction of my house to which I am my own contractor. In the event that I hire more than two (2) employees, I will furnish the Alleghany County Inspection Department with a copy of my Workmen’s Compensation Insurance prior to the issuance of a building permit. If I hire Sub-Contractors and they have Workers’ Compensation I will have the form from them stating so.

If I hire a licensed Electricians, Plumbers, and Mechanical Contractors, they will be responsible for calling in their own inspections.

I understand that by law I will have to occupy this residence for a period of twelve (12) months, before I would be eligible for selling this house.

Signature

Date
Alleghany County Inspection Department
Building Application

(Homeowner’s): Last Name: ___________________ First Name: ___________________

Construction Site location: ____________________________________________________

Owner’s Phone #: ___________________ Parcel ID #: _________________________

Gated Community  Yes ___ No ___ Gate Code____________ without code inspection will not be done

General Contractor ________________________ License #_______________________

Electrical Contractor ________________________ License#_______________________

Plumbing Contractor ________________________ License#_______________________

Mechanical Contractor ________________________ License#_______________________

Box For Office Use Only:

In Watershed: Y ☐ N ☐ Subdivision Type: Res ☐ Com ☐ In flood plain: Y ☐ N ☐

Distance of stream: ______ Stream Name: ___________ Near the Parkway: Y ☐ N ☐

On Ridge Y ☐ N ☐ Ridge Name____________________ Elevation______________

New _______ Addition_____ Remodeling______ Garage/Carport_______ Deck_____ Roofing____

Health Department # __________________ Stick Built_____ Log____ Modular__________

No. of Room_____ No. of Bedrooms______ No. of Bathrooms______ No. of stories_____

Type of Heat ______ SqFt Heated_______ SqFt Unheated______ Project Cost______________

Project: Residential_____ Commercial___ (Comm. Planning approval) Yes ______ No_______

Job Description:______________________________________________________________

Workers Comp Yes ☐ No ☐ If you check NO you must have less than three (3) employees!

I hereby certify that all information in the application is correct to the best of my knowledge and that all work shall comply with all the local, state and federal rules, regulations, ordinances and laws. I will have obtained the proper workers compensation for this job. I will notify the Alleghany County Building Inspections Department of any changes in the approved plans and specifications and contractor information for the project permitted herein. I understand the Alleghany County Building Inspections Department must receive payment of all permit fees within seven (7) days of date of application or permit will be void.

Applicant’s Signature____________________________________Date_________________
I____________________, State that I will be doing the _____Electrical, 
_____ Mechanical, _____Plumbing for:

Contractor/Home Owner’s Name: ____________________________________________

Address of Job Site: ________________________________________________________

I hereby certify that all information in the application is correct to the best of my knowledge and that all work shall comply with all the local, state and federal rules, regulations, ordinances and laws.

If in the event that I should abandon this job for any reason I shall inform the Alleghany Inspection Department so they can remove my company name from the said permit.

Company Name: __________________________________________________________

Company Owner Signature: _________________________________

License Number:____________________

Date: ______________
I_____________________, State that I will be doing the _____ Electrical, _____ Mechanical, _____ Plumbing for:

Contractor/Home Owner’s Name: __________________________________

Address of Job Site: _____________________________________________

I hereby certify that all information in the application is correct to the best of my knowledge and that all work shall comply with all the local, state and federal rules, regulations, ordinances and laws.

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License Number: ____________________

Date: ________________
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Address of Job Site: ______________________________________________________

I hereby certify that all information in the application is correct to the best of my knowledge and that all work shall comply with all the local, state and federal rules, regulations, ordinances and laws.

If in the event that I should abandon this job for any reason I shall inform the Alleghany Inspection Department so they can remove my company name from the said permit.

Company Name: _______________________________________________________

Company Owner Signature: _____________________________________________

License Number:__________________

Date: _____________________
Erosion Control Plan Statement

Home Owner’s Name:______________________________

- Will any land disturbing Activities occur in proximity (25 feet) to a lake or natural watercourse? Yes____No__
- Will any land disturbing activities occur in proximity (25 feet) to waters classified as trout waters? Yes____No__
- Will the land disturbing activities comprise more than One acre? Yes____No__

A Yes answer to any of the above questions indicates that an approved Erosion Control Plan is required prior to issuance of an Alleghany County Building Permit.

North Carolina Department of Environment and Natural Resources Erosion Control Plan Number:____________________

Applicant’s Signature:__________________________ Date:________________

Print Name:______________________________
Keep this certificate it has to be posted for the Final to be approved!!

<table>
<thead>
<tr>
<th>ENERGY EFFICIENCY CERTIFICATE</th>
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<td>N1101.9</td>
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Builder, Permit Holder or Registered Design Professional Print
Name: ____________________________
Signature: _________________________

Property Address: __________________

Date: _____________________________

| Insulation Rating – List the value covering largest R-Value Area to all that apply |
|----------------------------------|----------------------------------|
| Ceiling/roof: R-                 |                                  |
| Wall: R-                         |                                  |
| Floor: R-                        |                                  |
| Closed Crawl Space Wall: R-      |                                  |
| Closed Crawl Space Floor: R-     |                                  |
| Slab: R-                         |                                  |
| Basement Wall: R                 |                                  |

Fenestration:

U-Factor: _______________________
Solar Heat Gain Coefficient (SHGC): _______________________

Building Air Leakage

- Visually inspected according to N1102.4.2.1 OR
- Building Air Leakage Test Results (SEC. N1102.4.2.2)
  - ACH50 [Target: 5.0]
  - Or CGM50/SGSA [Target: 0.30]
Name of Tester / Company: _______________________
Date: _______________________
Phone: _______________________

Ducts:

Insulation: R- _______________________

Total Duct Leakage Test Result (Sect. N1103.2.2)
(CFM25Total/100SF) [Target: 6]
Name of Tester or Company: _______________________
Date: _______________________
Phone: _______________________

Certificate to be displayed permanently