Alleghany County Inspection Department Building Application

(Homeowner's): Last Name: First Name	2:
Construction Site location :	
Owner's Phone #:Parcel ID #	#
Gated Community YesNo Gate Code wi	thout code inspection will not be done
General Contractor	License #
Electrical Contractor	License#
Plumbing Contractor	License#
Mechanical Contractor Box For Office Use Only:	License#
In Watershed: Y□N □ High Quality Water Y□N □	In flood plain: Y \square N \square
Distance of stream:Stream Name:	Near the Parkway: Y \square N \square
On Ridge Y□N□ Ridge Name	Elevation
NewAdditionRemodelingGarage/CarportUtility	y BuildingDeckRoofing
Health Department #Stick BuiltLog	Modular Prefab Utility
No. of Room No. of Bedrooms No. of Bathrooms	s No. of stories
Type of Heat SqFt Heated SqFt Unheated	Project Cost
Project : ResidentialCommercial (Comm. Planning	approval) YesNo
Garage Basement Job Description:	
Workers Comp Yes No If you check NO, you must have	e less than three (3) employees!
I hereby certify that all information in the application is correct to the shall comply with all the local, state and federal rules, regulations, or the proper workers' compensation for this job. I will notify the Alleg Department of any changes in the approved plans and specifications permitted herein. I understand the Alleghany County Building Inspect of all permit fees within seven (7) days of date of application or permitted herein.	dinances and laws. I will have obtained thany County Building Inspections and contractor information for the project ctions Department must receive payment
Annlicant's Signature Date	