

HENDERSON COUNTY

Permit Application

DATE		
PERMIT #		

PROJECT INFORIVIA	HON														
STREET ADDRESS OF PROPOSED PROJECT				NO. OF FLOORS					L	USE OF PROPERTY					
APPLICANT			ADDRESS						CITY		STATE	ZIP CODE			
DBA (IF APPLICABLE)						NO.	D. E-MAIL ADDRESS (MAY BE USED FOR OFFICIAL COMMUNICATION)							CATION)	
CONTRACTOR INFO	RMATIC)N													
CONTRACTOR (INDIVIDUAL C	ONTACT)			CONTRA	ACTOR NUM	1BER		COMPANY NA	AME						
	1	T				P									
CURRENT CONTRACTOR'S LICENSE ON FILE?	☐ YES	□ NO	IF YES, LIST	NUMBER		PHONE NO	D.		E-M	AIL ADDRE	SS (MAY BE USED	CATION)			
PROPERTY OWNER I	NFORM	IATION													
PROPERTY OWNER (INDIVIDUAL CONTACT) ADDRESS			;				CITY			STATE	ATE ZIP CODE		DDE		
PROPERTY OWNER (COMPANY NAME)				F	PHONE NO. E-MAIL			E-MAIL AD	ADDRESS (MAY BE USED FOR OFFICIAL COMMUNICATION)					(NC	
DESCRIPTION OF PROPOSED PROJECT									A. B.		NEW CONST		CONST. AREA (SQ. FT)		NEW CONST
										MFD OTHER		MFD OTHER			
									VALUATION (\$)						
										VALU	REMODEL			CONS)	REMODEL
TOTAL VALUATION								TOTAL AREA							
FEE SCHEDULE FOR N	IEW BU	ILDING P	ERMITS	(The f	fee is ba	sed on t	he v	valuation	of th	e proie	ct)				
For projects valued at less															\$500
For projects valued at \$20	00,000 but	less than \$50	00,000				-					-1:11			\$1,000
For projects valued at \$50	00,000 but	less than \$1,	000,000												\$2,000
For projects valued at \$1,000,000 or more, the fee for e the first \$5,000,000										\$5,000					
For every \$1,000,000 or fraction thereof, an additional fee will be added										\$500					
NEW BUILDING PERM	/IIT PAC	K (All be	low are i	nclude	d in fee)										
 Review of Building 		•						Meetings	with	angina	ors contract	~~~~			
 Review of Building Plans Meetings with engineers, contractors, architects, etc Conducting a minimum of 3 site inspections Final Completion inspection 															
				rmit. Fi	ire Alarm	System					on Systems P				
Add	ditional	meetings	s and insp	pections	s may be	include	d de	ependina (on th	e scope	of the projec	rennii ~t			
							7								
FEE SCHEDULE FOR N	IEVV FIX	ED PIPE	SYSTEIVIS	•			+-	E SCHDUL	LE FO	R NEW	FIRE ALARM	SYST	EMS		
Plan Review	-		-			\$250		Plan Review							\$250.
Witnessing of Testing						\$100		Witnessing o	of Testir	ng					\$250
Inspection of fire extinguis	shing syste	ms in comme	ercial kitcher	ns, vent		\$100		Inspection o	f fire ala	arm system	n or additions to ex	kisting sy	/stems		\$250