

# Residential Permit Application



**DEVELOPMENT  
SERVICES  
DEPARTMENT**

Development Services Customer Service Center | One Exchange Plaza, Suite 400 | Raleigh, NC 27601 | 919-996-2495  
 Litchford Satellite Office | 8320 Litchford Road, Suite 130 | Raleigh, NC 27615 | 919-996-4200  
 For more project and process information, visit [www.raleighnc.gov/dsguide](http://www.raleighnc.gov/dsguide).

GENERAL INFORMATION		OFFICE USE ONLY	
NC Existing Building Code 2015		Transaction #	
NC Building Code 2012		Group #	
NC Building Code 2018		Technician	
Applicant:		Date:	
Project Address:			
Subdivision:		Lot #:	
Property Owner:	Property Owner Phone:		
Property Owner Email:			
Project Contact:	Project Contact Phone:		
Project Contact Email:			
PROJECT INFORMATION			
Choose Work Type(s)			
Accessory Structure Addition	Demolition	Single Family Dwelling/Duplex	Townhome
Alteration/Repair	Manufactured Home	Stand Alone	Water/Sewer Service
		Tree Conservation	Other
Provide a detailed project description:			
Site Information		Building Information	
Zoning District: _____		Existing bldg (sq. ft.): _____	Heated    Unheated
Overlay District: _____		Proposed new bldg (sq. ft.): _____	Heated    Unheated
Existing Use: _____		Total bldg size (sq. ft.): _____	Heated    Unheated
Proposed Use: _____		Existing height (ft.): _____	
Will impervious surface change? Yes    No		Proposed height (ft.): _____	
Existing impervious (sq. ft.): _____		Number of stories: _____	
Proposed change in impervious (sq. ft.): _____		Total construction cost:	
Proposed total impervious (sq. ft.): _____			
MECHANICAL EQUIPMENT QUESTIONS			
If the scope of the proposed work associated with this application consists of replacement of existing mechanical equipment only, and the answer to <b>ANY</b> of the below questions is "No" then a <u>plot plan</u> is required. See the <a href="#">Residential Plot Plan Checklist</a> for submission requirements. If the answer to <b>ALL</b> the below questions is "Yes" a permit could be obtained using the E-Permit process.			
1. Is (are) the A/C unit(s) for which the permit is being applied for <b>at the same location of the old/existing unit?</b>		YES	NO
2. Is (are) the A/C unit(s) for which the permit is being applied for <b>the same size or smaller (BTU or Tonnage) than the old/existing unit(s)?</b>		YES	NO
3. Is (are) the A/C unit(s) for which the permit is being applied for <b>the same type (split or package) unit?</b>		YES	NO

Applicant Signature: \_\_\_\_\_

<b>LIEN AGENT INFORMATION   <a href="http://www.liensnc.com">www.liensnc.com</a></b>
NC law requires appointment of a lien agent. Contractors/subcontractors can give notice when they are working on the project. Lien Agent appointments are not required for improvements under \$30,000, or to the owner's existing residence, or for public building projects.
<b>PLANS HOLDING POLICY</b>
It is the responsibility of the Applicant to pick up plans after each review cycle. If plans are not picked up 180 days from the last review cycle, they will be considered abandoned and will be destroyed.
<b>RESIDENTIAL INFILL COMPATIBILITY (UDO 2.2.7)</b>
If your project is subject to residential infill compatibility (UDO Section 2.2.7) a foundation survey may be required with this project. The foundation survey must be available at the time of zoning site inspection.

UNDER PENALTY OF LAW, THE UNDERSIGNED DOES HEREBY CERTIFY, THAT THE SIGNATURE SHOWN IS THE SIGNATURE OF THE LICENSE HOLDER. THE UNDERSIGNED FURTHER INDEMNIFIES THE CITY OF RALEIGH AND ITS EMPLOYEES AGAINST DAMAGES THAT MAY ARISE DURING THE CONSTRUCTION PROCESS.

<b>BUILDING</b>					
License Holder Name (PRINT):			License Holder Signature:		
Contractor:			NC License #/Class:		
Address:			City/State/Zip:		
Phone:			Email:		
Total Project Sq. Ft:		Total Building Cost:		Wake Co. Well/Septic Permit #:	
<b>Utilities</b>	Water:	Public	Private	Sewer:	Public Private
<b>ELECTRICAL</b>					
License Holder Name (PRINT):			License Holder Signature:		
Contractor:			NC License #/Class:		
Address:			City/State/Zip:		
Phone:			Email:		
<b>Voltage</b>	50 or less	600 or less	over 600	Total Electrical Cost:	
<b>PLUMBING</b>					
License Holder Name (PRINT):			License Holder Signature:		
Contractor:			NC License #/Class:		
Address:			City/State/Zip:		
Phone:			Email:		
<b>PLUMBING (NFPA 13D Res Sprinklers)</b>					
License Holder Name (PRINT):			License Holder Signature:		
Contractor:			NC License #/Class:		
Address:			City/State/Zip:		
Phone:			Email:		
<b>MECHANICAL</b>					
License Holder Name (PRINT):			License Holder Signature:		
Contractor (HVAC):			NC License #/Class:		
Address:			City/State/Zip:		
Phone:			Email:		
<b>Type of Heating</b>	Electrical	Gas	Hot Water	Oil	Air Condition Size in Tons:
<b>Work Includes</b>	Appliances	Appliance/Duct	Ventilation	Refrigeration	Fuel Piping
<b>ZONING</b>					
Contractor:		Phone:		Email:	
Address:			City/State/Zip:		
<b>Type of Work</b>	Accessory Structure Solid Waste/Recycling	Fence/Wall/Retaining wall	Landscaping Parking Lot	Site Plan Swimming Pools	Other

URBAN FORESTRY				
Contractor:		Phone:		Email:
Address:			City/State/Zip:	
Type of Work	Tree Conservation Area Tree Buffer Protection	Tree Pruning (TCA) Tree Removal (TCA)	Tree Impact (Right-of Way) Prop. Street Trees (Right-of-Way)	
LAND DISTURBING/FLOOD				
Contractor:		Phone:		Email:
Address:			City/State/Zip:	
Total Disturbed Area (sq. ft.):			Construction Cost:	
Flood Contractor:		Phone:		Email:
Address:			City/State/Zip:	
RIGHT-OF-WAY				
Contractor:		Phone:		Email:
Address:			City/State/Zip:	
Performance Bond and General Liability on file with City? Yes No				
NOTE: Permits for work within the right-of-way cannot be issued without bond.				
Type of Work				
Driveway new/mod				Number of Driveways:
Sidewalk/Curb and Gutter new				Linear feet:
Utility Service Installation				Number of cuts:
Sidewalk Obstruction		Start Date (m/d/yy):		Duration (Days):
Lane Obstruction		Start Date (m/d/yy):		Duration (Days):
Street Obstruction (Full Closure)		Start Date (m/d/yy):		Duration (Days):
UTILITY CONNECTION (Plumbing Utility, Stub, and Right-of-Way Permit may be required)				
Contact Person:		Phone:		Email:
Address:			City/State/Zip:	
Tap will be installed by: City Contractor		Property: Residential Commercial		
Type of Service	Water Sewer Irrigation	Type of Meter	New Meter Split Meter Size of Meter	
Master Meter				
UTILITY SERVICE (Water and Sewer service in Right-of-Way or Easement for Single Parcel)				
Contractor:		Phone:		Email:
Address:			City/State/Zip:	
Performance Bond and General Liability on file with City? Yes No			NC License #/Class:	
Water Size	Type	Sewer Size	Proposed Stub Location	
			Easement or Right-of-Way (req. Right-of-Way Permits)	
			Easement or Right-of-Way (req. Right-of-Way Permits)	
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If utility services for multiple parcels are needed please use the Water & Sewer Service <a href="#">Addendum</a>				
Plumbing Utility (Water and Sewer line from Right-of-Way to Foundation)				
Contractor		Phone		Email
Address			City/State/Zip	
Water Service (From Meter to five feet of foundation):			Sewer Service (From property line to ten feet of foundation):	