Caswell County Building Inspections

144 Main Street, P.O. Box 1406, Yanceyville, NC 27379
336-694-9731 ext. 201 – Kcaison@caswellcountync.gov

PERMIT APPLICATION

Application Type: ☐ Building ☐ Electrical ☐ Plumbing ☐ Mechanical

Owners Name – Last:	**First:**		**Phone #:**
Address:			**Email:**
City:	**State:**	**Zip:**	**Developer Name:**
Project Street Address:			**Developer Phone #:**
City:	**State:**	**Zip:**	**Tax Map & Parcel #:**
# Existing Buildings:	**# Existing Mobile Homes:**		**Utility Provider:**
Directions to Project:			

Type of Work: ☐ New ☐ Addition ☐ Renovation ☐ Demolition ☐ Modular (Off) ☐Modular (On)
☐ Single-Wide (Year:_____) ☐ Double-Wide (Year:_____) ☐ Other:_____

Construction Power Pole:☐	**Basement:**☐	**Porches:**☐	**Decks:**☐	**Garage:**☐	**Fireplaces:** ☐Masonry ☐Pre Fab ☐Gas

Square Footage:	**# Bedrooms:**	**# Baths:**	**# Others Rooms:**

# Stories:	**Electrical System:**
Height of Proposed Structure:	☐ 100 amp single phase ☐ 200 amp single phase ☐ 400 amp single phase
Central Air: ☐Yes ☐No	☐ Extend existing wiring ☐ Replace existing wiring
Type of HVAC: ☐ Electric ☐ LP ☐ Natural	☐ Adding additional fixtures/outlets
☐ Gas ☐ Oil ☐ Other:_____	☐ Service Change FROM ___ amp ___ overhead / ___ underground
Project Cost:	TO ___ amp ___ overhead / ___ underground
Proposed Use of Structure:	

General Contractor:		**License #:**
Address:		**Phone #:**
Contact Name:	**Email:**	**Fax #:**
Signature:		**Phone #:**
Electrical Contractor:		**License #:**
Address:		**Phone #:**
Signature:		**Email:**
HVAC Contractor:		**License #:**
Address:		**Phone #:**
Signature:		**Email:**
Plumbing Contractor:		**License #:**
Address:		**Phone #:**
Signature:		**Email:**

Description of Work/Comments:

Applicant/Owner/Agent Name:	**Phone #:**
Signature:	**Date:**