



# City of Gastonia

North Carolina  
 Inspections Division  
 150 S. York St., Gastonia, NC 28052  
 Phone: 704-866-6729  
 Fax: 704-836-0044

## Building Permit Application

Project Address: \_\_\_\_\_

Project Location: \_\_\_\_\_

Building Owner: \_\_\_\_\_

Primary Contractor				
	Owner Name	Address	Phone	
	Building Contractor	Address	Phone	NC License No.
	Electrical Contractor	Address	Phone	NC License No.
	Mechanical Contractor	Address	Phone	NC License No.
	Plumbing Contractor	Address	Phone	NC License No.
	Demolition Contractor	Address	Phone	
	Pool Contractor	Address	Phone	
	Sign Contractor	Address	Phone	

### Basic Information ( Check all that apply )

Commercial \_\_\_ Residential \_\_\_ Garage \_\_\_ Accessory Building \_\_\_ Pool \_\_\_ Sign \_\_\_ Demolition \_\_\_ Remodel \_\_\_

**Which Code will this project be built under? IRC \_\_\_ IBC \_\_\_ (Check one)**

Is this project on City Sewer or Septic Tank? \_\_\_\_\_

Is this structure being built on a slab or crawl space? \_\_\_\_\_

Will the structure have gas appliances or heating ( Y/N )? \_\_\_\_\_

Will the project have a masonry or pre-fab chimney? \_\_\_\_\_

Total heated square footage: \_\_\_\_\_ Total unheated square footage: \_\_\_\_\_

Basement ( Y/N )? \_\_\_\_\_ Finished / Unfinished ( Circle one )

Bonus Room ( Y/N )? \_\_\_\_\_ Finished / Unfinished ( Circle one )

Estimated Cost of Construction: \$ \_\_\_\_\_

### Provide a Brief Description of the Work. ( i.e., size of Building/Addition, etc. )

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

**Phone the IVR system at 704-836-0048 to check the status of your application.**