

**IREDELL COUNTY DEPARTMENT OF PLANNING & ENFORCEMENT
INSPECTION DIVISION
PLUMBING PERMIT APPLICATION
P. O. BOX 788; 227 S. CENTER ST.
STATESVILLE, NC 28687
TELEPHONE: (704) 878-3113
FAX: (704) 878-3171
www.mspection.com/counties/iredell
www.co.iredell.nc.us**

ACCOUNT #: _____ DATE: _____ FEE: _____ PERMIT #: _____

BUILDING OWNER: _____ PHONE: _____

OWNER'S ADDRESS: _____

ZIP: _____

LOCATION OF JOB: _____

CONTRACTOR: _____ PHONE: _____

FAX: _____ CELL: _____ DIRECT CONNECT: _____

CONTRACTOR'S ADDRESS: _____

ESTIMATED COST: _____ LICENSE #: _____

REMARKS: _____

NUMBER OF FIXTURES OR TRAPS: _____

HOT WATER HEATERS: _____

SEWER: _____

SPRINKLER: _____

GAS PIPING: _____

NUMBER OF GAS APPLIANCES: _____

OTHER: _____

MINIMUM FEE: _____

NOTES

1. CALL FOR INSPECTIONS AT PROPER STAGE OF WORK.
2. CHECK JOB FOR INSPECTION RESULTS.
3. THIS APPLICATION BECOMES A PERMIT ONLY WHEN VALIDATED AND APPROVED.
4. FEES TO BE ENTERED BY INSPECTION AGENCY.

THE UNDERSIGNED HEREBY MAKE APPLICATION FOR PERMIT AND INSPECTIONS OF WORK DESCRIBED, AND AGREES TO COMPLY WITH ALL APPLICABLE LAWS REGULATING THE WORK.

SIGNATURE OF APPLICANT: _____ DATE: _____

APPLICATION APPROVED BY: _____

A NON-REFUNDABLE \$45.00 APPLICATION FEE IS CHARGED ON ALL PERMIT APPLICATIONS AND ALL FEES ARE TO BE ENTERED BY THIS INSPECTION AGENCY.