



Application for Trade Permit

Type of Permit: ELECTRICAL PLUMBING MECHANICAL

Use of Structure: Single Family Residential Multi Family Residential Commercial

Company Name and/or Contractor Name:

NC License # _____

QualifierName(s): _____

Contractor Telephone# _____ Mobile# _____

Contractor Email: _____

Contractor Address: _____

City/State/Zip Code _____

Project Address: _____

Owner of Project
Address: _____

Description of
Work: _____

Value of Work \$ _____

By signing this application below, I hereby affirm the information provided is true and correct to the best of my knowledge and agree to comply with the provisions of the NC State Building Codes and other applicable laws and ordinances. I am aware that this permit will become void after (6) months from the date of issuance if no inspections have been scheduled and completed to verify work on the project has commenced. I am aware that I or my company is responsible for any fees related to this permit.

Signature (Qualifier of this License number)

Print Name

Date

Inspections Department (828)-438-5266
305 E Union Street Ste A100 Morganton NC 28655
PO Box 3448 Morganton NC 28680

Applications may be:
Emailed to: DandDservices@ci.morganton.nc.us
Faxed to: (828) 438-5264