



## PLANNING & COMMUNITY DEVELOPMENT



P.O. Box 905  
1048 Carriage Oaks Drive  
Carthage, NC 28327  
Planning: 910.947.5010  
Central Permitting: 910.947.2221  
Fax: 910.947.1303  
[www.moorecountync.gov](http://www.moorecountync.gov)

### EXTERNAL CHECKLIST FOR DOCKS, PIERS AND BULKHEAD PERMIT APPLICATIONS

- Completed Miscellaneous Permit Application for the "Dock, Pier or Bulkhead construction. Applications are found within our department, Planning and Community Development located at 1048 Carriage Oaks Drive, Carthage, NC 28327, or on line at [www.moorecountync.gov](http://www.moorecountync.gov), Department, Planning & Zoning, Applications. If you would like to speak with someone regarding our telephone number is 910-947-5010 or 910-947-2221.
- A permit from the Army Corp of Engineers is required for post or pile supported structures constructed over navigable waters.
- Any bulkhead retaining more that 48 inches of soil will require an engineered set of plans.
- A recorded deed may be required to verify ownership. A survey may also be required if the lot configuration does not reflect the current records of the county.
- A zoning permit may be required if the subject property is located within one of the following Municipalities or their ETJ.
  - Cameron: 910-245-3212
  - Carthage: 910-947-2331
  - Foxfire: 910-295-5107
  - Robbins: 910-948-2431
  - Taylor Town: 910-295-4010
  - Vass: 910-245-4676
  - Whispering Pines: 910-949-3141



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Miscellaneous Permit Application			
Application Date: _____			
Location/Address of Property: _____			
Description of Proposed Work: _____ _____ _____			
Applicant: _____			Phone: _____
Owner: _____			Phone: _____
Owner Address: _____		City: _____	St: _____ Zip: _____
<b>Type of Permit:</b> <input type="checkbox"/> ATF <input type="checkbox"/> Day Care <input type="checkbox"/> Group/Therapeutic Home <input type="checkbox"/> Bulkhead/Dock <input type="checkbox"/> Sign(s) <input type="checkbox"/> ABC <input type="checkbox"/> Demolition <input type="checkbox"/> Swimming Pool <input type="checkbox"/> Other: _____			
If the project is a bulkhead, dock or pool please list the estimated cost of the project			Total Estimated Cost \$ _____
Please list the names of the contractors who will be performing the work for this project. If the work will be performed by the owner just write owner or self in the name field. Please put N/A in any fields that are not applicable to the project.			
General Contractor:		Phone: _____	License: _____
Address: _____		City: _____	St: _____ Zip: _____
Electrical Contractor:		Phone: _____	License: _____
Address: _____		City: _____	St: _____ Zip: _____
Design Professional:		Phone: _____	License: _____
Address: _____		City: _____	St: _____ Zip: _____
Pool Contractor:		Phone: _____	License: _____
Address: _____		City: _____	St: _____ Zip: _____
I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other applicable State and local laws, ordinances and regulations. The Inspection Department will be notified of any changes in the approval plans and specifications for the project permitted herein. I understand if this application is incomplete, no inspections will be performed on the project.			
Owner/Agent Signature: _____			Date: _____