



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

EXTERNAL CHECKLIST FOR SINGLE TRADE PERMIT APPLICATION (ELECTRICAL, MECHANICAL, PLUMBING OR GAS)

- Completed Miscellaneous Permit Application for the individual trade seeking approval Electrical, Mechanical or Plumbing. Applications can be obtained within our department, Planning and Community Development located at 1048 Carriage Oaks Drive, Carthage, NC 28327, or online at www.moorecountync.gov, Department, Planning and Zoning, Applications. If you would like to speak with someone regarding this type of permit our telephone number is 910-947-5010 or 910-947-2221.
- Permit application must include the contractor's license numbers for the trade permits being obtained. The Electrical Board's website is <http://lookup.ncbeec.org>. The Plumbing and Mechanical Board's website is <http://nclicensing.org/onlineReg.htm>.
- 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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Electrical, Mechanical, and Plumbing Permit Application			
Application Date: _____			
Location/Address of Property: _____			
Description of Proposed Work: _____ _____ _____			
Applicant:			Phone: _____
Property Owner:			Phone: _____
Property Owner Address: _____	City: _____	St: _____	Zip: _____
Electrical: <input type="checkbox"/> Change of Service <input type="checkbox"/> Power Reconnect <input type="checkbox"/> Farm Pole <input type="checkbox"/> Other: _____			
Mechanical: <input type="checkbox"/> System Change Out: select one: <input type="checkbox"/> disconnect/reconnect only or <input type="checkbox"/> run new wires (requires electrical license)			
Number of units: _____ Location of work: <input type="checkbox"/> Crawlspace <input type="checkbox"/> Attic <input type="checkbox"/> Outside <input type="checkbox"/> Other _____			
<input type="checkbox"/> Fuel Gas Piping <input type="checkbox"/> Hood System(s) #: _____ <input type="checkbox"/> Refrigeration #: _____ <input type="checkbox"/> Other: _____			
Please note it is the contractors responsibility to make sure we have access to all of the work being permitted in order to do the inspection. This means if a ladder was required to reach the work location, we will need you to supply a ladder for the inspection.			
Plumbing: <input type="checkbox"/> Water Heater Change Out <input type="checkbox"/> Replace Water/Sewer Lines <input type="checkbox"/> Irrigation System <input type="checkbox"/> Other: _____			
Please list the names and license #'s 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 write N/A in any fields that are not applicable to the project.			
Electrical Contractor:	Phone: _____	License: _____	
Address: _____	City: _____	St: _____	Zip: _____
Mechanical Contractor:	Phone: _____	License: _____	
Address: _____	City: _____	St: _____	Zip: _____
Fuel Gas Contractor:	Phone: _____	License: _____	
Address: _____	City: _____	St: _____	Zip: _____
Plumbing 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: _____