



## Richmond County Building Inspection Department

221 South Hancock St  
Rockingham, NC 28379

chasity.woolard@richmondnc.com

Telephone: (910) 997-8204

Fax: (910) 997-8206

### Building Permit Application

Owner/Project Name: \_\_\_\_\_

Owner/Project Address \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Type of work to be done: \_\_\_\_\_

Building Use: \_\_\_\_\_

Residential       Commercial       Modular       Detached Accessory Building

New Project       Remodeling       Addition

Project Cost: \_\_\_\_\_

No. Stories: \_\_\_\_\_

Total Sq. Ft.: \_\_\_\_\_

Heated Sq Ft.: \_\_\_\_\_

Garage sq ft.: \_\_\_\_\_

Basement sq ft: \_\_\_\_\_

Sewer:

Water:

Public

Public

Private

Private

Building Contractor: \_\_\_\_\_

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

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

State License #: \_\_\_\_\_

I hereby certify that the above statements are true, and all work is being performed under the State License number above.

Contractor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Permits expire after 6 months of issuance if work has not commenced or if work has discontinued for a period of 12 months from last inspection.