

PLANNING & INSPECTIONS DEPARTMENT

Residential Building Permit Application Packet

INFORMATION (STEPS) NEEDED TO OBTAIN A BUILDING PERMIT IN A RESIDENTIAL DISTRICT:

- A. A **pre-permit letter and a map** of property (this is needed to obtain the approval for your well/septic) is obtained in the Planning & Inspections Department and taken to **Environmental Health** (Same building 1ST Floor)
- B. If public utilities are being used; then you'll need to go to the City or County Public Works to pay for the taps; then submit a receipt to **Planning & Inspections** demonstrating that any applicable fees have been paid.
- C. Must have **Authorization to Construct** for well/septic from Environmental Health or a receipt from Public Works showing that fees have been paid/deferred. Plans **will not** be accepted for review without **Authorization to Construct** or Receipt.
- D. If the property is located within the city limits of Lincolnton or its ETJ, a **City Zoning Permit** must be obtained from City Zoning. Their office is located at 114 W. Sycamore St., Lincolnton, NC 28092. Their phone number is (704)736-8930. Plans **will not** be accepted for review without prior approval by City Zoning.
- E. Must have completed **Erosion & Sediment Control Application** with the property owner's signature and contractor's signature. The type of application needed depends on the amount of land being disturbed. For more information please contact **Natural Resources** at 704-736-8501. Plans will not be accepted for review without this form signed by both parties.
- F. A **Lien Agent Appointment** per North Carolina Session Law SL2012-158, prior to plans being submitted for review. Information of Lien Agent Appointment is available at www.liensnc.com. Plans **will not** be accepted without a Lien Agent Appointment.

G. The following forms must be completed:

- 1) **Residential Application**- must be filled out completely. If something does not apply please note **N/A** on that line.
- 2) Subcontractors need to pull a separate permit once your permit is obtained. The subcontractor will **use the same permit number**.
- 3) **Appendix D form**- this is an Affidavit for Workers Comp verifying coverage.
- 4) **Erosion & Sediment Control Application** signed by the owner and contractor.
- 5) **Zoning Permit Checklist**
- 6) **Affidavit for Licensure Exemption** for owners acting as General Contractor, please refer to the attached policy for owners acting as their own General Contractor.

H. A **complete set of plans** for the house you are building is required. These plans will be reviewed and stamped “JOB COPY” and must **be left on the job site** for the inspector to review. Inspections cannot be completed without the stamped set of plans on site. A Wasted Trip fee will be charged if plans are not on site for a scheduled inspection.

I. The above information is required to be submitted to Planning & Inspections to start the review process. The process for **review is approximately 5-7 business days**. The contact person will be called when the permit and plans are available to be picked up.

J. Payment is due when the permit is picked up: The following are acceptable forms of payment.

- 1) Building Permit: cash, credit card (Visa, Mastercard or Discover) or check payable to Lincoln County. If you have an established Charge Account with Planning & Inspections you may have the permit charged and a monthly statement will be mailed.)
- 2) Soil & Erosion: cash, credit card (Visa, Mastercard or Discover) or check payable to Lincoln County.

ONE AND TWO FAMILY DWELLINGS
& RESIDENTIAL ACCESSORY STRUCTURES



LINCOLN COUNTY, NORTH CAROLINA
ZONING PERMIT CHECKLIST

<input type="checkbox"/> SINGLE FAMILY		<input type="checkbox"/> TWO FAMILY		<input type="checkbox"/> MANUFACTURED HOME		<input type="checkbox"/> POOL		PARCEL ID	PERMIT #	STAFF
<input type="checkbox"/> ADDITION		<input type="checkbox"/> GRADING		<input type="checkbox"/> ACCESSORY BUILDING		<input type="checkbox"/> DEMOLITION				
OWNER _____				CONTRACTOR _____						
ADDRESS _____				ADDRESS _____						
CITY _____ STATE _____				CITY _____ STATE _____						
ZIP _____ PHONE _____				ZIP _____ PHONE _____						
PROPERTY LOCATION (Subdivision & Lot # or Address)										
MANUFACTURED HOMES						LIVING SPACE				
Currently set up in Lincoln County? <input type="checkbox"/> YES <input type="checkbox"/> NO						Will the accessory structure have a bedroom? <input type="checkbox"/> YES <input type="checkbox"/> NO				
MANUFACTURER _____						Will the accessory structure have a range? <input type="checkbox"/> YES <input type="checkbox"/> NO				
SIZE _____ YEAR _____										
CLASS: A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/> F <input type="checkbox"/>										
PRINCIPAL STRUCTURE						ACCESSORY STRUCTURE				
PROPOSED / REQUIRED SETBACKS						PROPOSED / REQUIRED SETBACKS				
FRONT _____ / _____						SIZE _____ / _____ EXISTING _____				
RIGHT SIDE _____ / _____						FRONT _____ / _____ PROPOSED _____				
LEFT SIDE _____ / _____						RIGHT SIDE _____ / _____ TOTAL _____				
REAR _____ / _____						LEFT SIDE _____ / _____ MAXIMUM _____				
WIDTH @ BUILDING LINE _____						REAR _____ / _____				
HEIGHT _____ / _____						HEIGHT _____ / _____				
LOT SIZE _____						LOT SIZE _____				
ZONING _____ PLAT YES <input type="checkbox"/> NO <input type="checkbox"/> DRAINAGE EASEMENT YES <input type="checkbox"/> NO <input type="checkbox"/> R/W Width _____										
SPECIAL FLOOD HAZARD AREA: YES <input type="checkbox"/> NO <input type="checkbox"/>						VOLUNTARY AGRICULTURAL DISTRICT				
PANEL # 3710 _____ ZONE _____ Flood Admin. _____						Is the subject property within 2000' of a Voluntary Agricultural District? <input type="checkbox"/> YES <input type="checkbox"/> NO				
STREAMSIDE BUFFER Does the parcel lie within 50' of a stream? <input type="checkbox"/> YES <input type="checkbox"/> NO						UTILITIES <input type="checkbox"/> SEPTIC <input type="checkbox"/> WELL EH Authorization to Construct <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> PUBLIC SEWER <input type="checkbox"/> PUBLIC WATER FEES <input type="checkbox"/> PAID <input type="checkbox"/> DEFERRED				
WATERSUPPLY WATERSHED NAME _____ CLASS: <input type="checkbox"/> II-C <input type="checkbox"/> II-P <input type="checkbox"/> III-P <input type="checkbox"/> IV-C <input type="checkbox"/> IV-P MAX IMPERVIOUS ALLOWED _____						Erosion & Sediment Control Form <input type="checkbox"/> YES <input type="checkbox"/> NO Lien Form <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A Owner Exemption Form <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A Site Plan <input type="checkbox"/> YES <input type="checkbox"/> NO City Zoning <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A				
<p>I certify that I have read the foregoing statement and that I accept responsibility for this project including any penalties assessed. I understand that all work is subject to inspection or testing and the inspector's discretion and the filed inspector has final authority. I further understand that it is my responsibility to meet all land use regulations and conditions applicable to this permit. I have also completed a zoning site plan attached to this application. I also agree to allow employees of Lincoln County to enter this property during reasonable hours for the purpose of making zoning and building inspections. This permit shall expire unless the work authorized by it shall have commenced within six months of its issuance, or if work authorized by it is discontinued for a period of one year or more.</p>										
APPLICANT SIGNATURE						DATE				
<div style="border: 1px solid black; padding: 10px; width: fit-content; margin: auto;"> <p>Label Here</p> </div>										



Residential Building Permit Application
Lincoln County Planning & Inspections Department
115 W. Main St., Lincolnton, NC 28092
ResidentialPermits@LincolnCountyNC.gov

Parcel Id #:

Permit #:

APPLICANT INFORMATION _____

Applicant Name: _____ Phone #: _____

Email: _____

Address: _____

City: _____ State: _____ Zip: _____

Land Owner's Name (if not same) _____ Phone #: _____

SITE INFORMATION _____

Address where structure is to be located: _____

Subdivision Name: _____ Lot #: _____

APPLICATION TYPE _____

(check all that apply)

New Construction Modular Home (on frame/off frame) Addition/Alteration/Renovation Other
(explain below)

Description of Work: _____

CONSTRUCTION COST for Structure (do not include cost of land): _____

GENERAL CONTRACTOR _____

Name (from License): _____ License #: _____

Email: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone #: _____

*****Subcontractor's must pull and pay for separate permit for each trade****

STRUCTURE INFORMATION _____

* Any lots created after June 30, 2001 must observe a 50' setback from the 760' elevation (Catawba River Riparian Buffer Rules)

Total Sq. Ft.: _____ Heated Sq. Ft.: _____ Unheated Sq. Ft. _____

Carport Attached Garage Basement (FINISHED/UNFINISHED) Porch Deck(s)

of stories: _____ # of Bedrooms _____ Total # of Baths: _____ # Future Baths _____

Foundation: Basement Crawl Slab Heat Type: Electric LP Nat'l Gas

of Fireplaces: _____ Building Height: _____

Water Supply: Well City Water County Water **Fees Paid:** Tap Availability

Sewer Supply: Septic Gravity Lift Pump **County Sewer:** Gravity Pressure Lift Pump

(continued on reverse side)

Property located in Voluntary Agricultural District:

NO
 YES

I have reviewed the most current Lincoln County Agricultural Districting Map found at the Register of Deeds Office or Planning & Inspections. I understand that activities such as pesticide spraying, manure spreading, machinery operations, livestock operations, logging and other common farming and forestry activities may occur at any time in these areas.

Signature: _____ Date: _____

Capacity Fee Deferment Statement

For those connecting to public water and/or sewer, please sign and date after have carefully read the following agreement

I, _____, understand that the capacity fees for water and/or sewer are being deferred and can be paid at any time until the final inspection is scheduled on the improvements permitted herein. I also understand that the final inspection will not be scheduled until the fees are paid and that it is my responsibility to pay the fees without further notice from the County. I also understand that the capacity fee to be paid will be the amount in effect at the time the building permit was issued.

Signature: _____ Date: _____

PLEASE READ THE FOLLOWING BEFORE SIGNING:

By signing this application below, I certify that I am authorized to apply for permits on this job, that the information given is true and complete to the best of my knowledge and that all work **will comply with North Carolina & local building codes, and the Unified Development Ordinance concerning this proposed use.** I attest that the floor areas listed above are accurate and that I have at least one complete set of plans available on the job site for the Inspector. I am aware that this permit will become void after six (6) months from the date of issuance if no inspections have been scheduled and completed to verify work on the project has commenced. For extended projects, I understand that the work must be verified & documented on a yearly basis or the permit will expire. **Any violations of the aforementioned regulations and/or the Unified Development Ordinance will be grounds for revocation of any and all permits issued.**

I certify that I have read the statement above and I accept responsibility for this project including any penalties assessed. I understand that all work is subject to inspection or testing at the Inspector's discretion and the field inspection has final authority. I also understand that it is my responsibility to meet all zoning setbacks and restrictions. I have completed a zoning site plan for this application.

Signature: _____

Print Name: _____ Date: _____

CONSTRUCTION WITHOUT THE USE OF A LICENSED GENERAL CONTRACTOR

GENERAL STATUTE 87-14 (G.S. 87-14) GIVES THE FOLLOWING CONDITIONS WHEN AN UNLICENSED PERSON, FIRM OR CORPORATION MAY BE ISSUED A PERMIT FOR THE CONSTRUCTION OF A PROJECT:

1. THE TOTAL COST OF THE PROJECT **MUST NOT** EXCEED \$39,999.99 (OR)
2. THE PROJECT **MUST NOT** BE FOR LEASE, RENT OR SALE AND MUST BE OWNED AND OCCUPIED FOR A PERIOD OF NO LESS THAN 1 FULL YEAR BY THE OWNER (OR)
3. FOR A MODULAR CONSTRUCTED PER VOL. VIII, WE MUST HAVE PROOF OF A \$5000.00 SURETY BOND.

IF AN UNLICENSED PERSON OBTAINS A PERMIT UNDER G.S. 87-14, THEY SHALL BE AFFORDED ALL THE AUTHORITY, RESPONSIBILITY AND COURTESIES OF A LICENSED GENERAL CONTRACTOR. IT SHALL BE THE RESPONSIBILITY OF THE PERMIT HOLDER TO MAKE HIM/HERSELF AWARE OF AND TO COMPLY WITH ALL STATE AND LOCAL CODES, ORDINANCES AND GENERAL STATUTES. COPIES OF THE CODES ARE AVAILABLE AT THE NORTH CAROLINA DEPARTMENT OF INSURANCE AT WWW.NCDOI.COM AND GENERAL STATUTES ARE AVAILABLE AT WWW.NCLEG.NET, THE BOOKSTORE AT GASTON COLLEGE, THE LICENSING BOARD FOR GENERAL CONTRACTORS, AND AT THE LOCAL LIBRARY. THIS **ONE** PERSON WILL BE RESPONSIBLE FOR CALLING IN ALL INSPECTION REQUESTS AND COORDINATING ALL CONCERNS DIRECTED TO THE INSPECTORS. THE INSPECTION RESULTS WILL NOT BE DISCUSSED WITH ANYONE OTHER THAN THE PERMIT HOLDER. THE ONLY EXCEPTION TO THIS IS IF LICENSED CONTRACTORS ARE USED FOR THE INDIVIDUAL TRADES (FRAMING, ELECTRIC, PLUMBING, OR MECHANICAL) WE WILL DISCUSS WITH THEM ANY ISSUES ASSOCIATED WITH THEIR WORK.

Signature: _____ Date: _____

**EROSION AND SEDIMENT CONTROL
FOR SINGLE LOT DISTURBANCE OF LESS THAN ONE ACRE
APPLICATION
FEE = \$50 PER LOT**

Building & Land Dev. (704)736-8440

Natural Resources (704)736-8501

L O C A T I O N / T Y P E	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">SUBDIVISION</th> <th style="width: 15%;">STREET #</th> <th style="width: 15%;">STREET NAME</th> <th style="width: 15%;">PARCEL ID#</th> <th style="width: 15%;">LOT#</th> <th style="width: 15%;">PERMIT #</th> <th style="width: 15%;">TYPE</th> </tr> </thead> <tbody> <tr> <td colspan="7">Size of lot: _____ (sq ft or acres)</td> </tr> <tr> <td colspan="7">Amount of lot to be disturbed: _____ (sq ft or acres)</td> </tr> <tr> <td colspan="7">Anticipated starting date of construction: _____</td> </tr> <tr> <td colspan="7">Is there a stream, lake or watercourse on or near the lot? <input type="checkbox"/> YES <input type="checkbox"/> NO (If yes show on sketch) Name _____</td> </tr> <tr> <td colspan="7">Structure Type: SFD MODH MFSW MFDW ADD/ALT ACC BLDG</td> </tr> </tbody> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> A P P R O A C H <p>Choose one of the following:</p> <p><input type="checkbox"/> The most appropriate option from the back of this notice is option _____ or a combination of options _____ & _____.</p> <p><input type="checkbox"/> A sediment basin located on lot _____ is handling soil erosion and sedimentation control. 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EROSION CONTROL OPTIONS FOR LOT CONSTRUCTION

The Soil Erosion and Sedimentation Control Ordinance requires that anyone conducting a land-disturbing activity prevent sediment from leaving the disturbed site. Furthermore, conducting any land-disturbing activity consisting of one acre or more requires a permit before beginning the disturbance. This includes disturbance of multiple lots totaling one acre or more, regardless of proximity to each other within a subdivision; in cases where fill material is stockpiled, needed, or wasted, the area where this material is stored, coming from, or going to, must be included in the total area of disturbance. Erosion Control measures must be installed prior to any grading or construction on site and maintained correctly to function properly. Please refer to the [NC Erosion and Sediment Control Planning and Design Manual](#) for specific guidance as it relates to installation and maintenance. The site shall be inspected for maintenance needs weekly and after each storm event, whichever is sooner.

SEDIMENTATION AND EROSION CONTROL OPTIONS	
LEGEND	<p>INSTRUCTIONS: IDENTIFY ONE OR ANY COMBINATION OF LETTERS FROM THE SEDIMENT CONTROL SKETCHES BELOW THAT BEST DESCRIBES THE EROSION CONTROL MEASURES THAT WILL BE USED DURING CONSTRUCTION.</p> <p>Silt Fence: </p> <p>Construction Entrance: </p> <p>Direction of Flow: </p>
	<p>Construction Sequence:</p> <ol style="list-style-type: none"> 1. Install construction entrance; 2. Install silt fence; 3. Rough grade site; 4. Final grade site; 5. Stabilize site; 6. Remove erosion control measures after site has been inspected for compliance by the Natural Resource Department.
EROSION CONTROL OPTIONS	<p>Flow to the Rear OPTION A</p> <p>Flow to the Front OPTION B</p> <p>Flow to the Left OPTION C</p> <p>Flow to the Right OPTION D</p> <p>Flow to the Front & Rear OPTION E</p> <p>Flow to the Left & Right OPTION F</p> <p>EXAMPLE</p>
	<p>Construction Examples</p> <p>Spacing of metal tee post with fabric shall be max. of 6' without wire fence Spacing of metal tee post with fabric and wire fence shall be max. 8'</p>



County Of Lincoln, North Carolina

Planning & Inspections Department

1-16-2013

Policy for property owners acting as their own General Contractor

To verify compliance with NC general statutes and the rules of the NC general contractors licensing board, the following are required in order to issue a permit that the value of work is \$40,000 or greater to the property owner to act as the general contractor. This applies to both residential and commercial projects

- The deed of record for the property must be in the owner's name. If the deed is in the name of a corporation then supporting documentation must be provided to show the corporation is owned solely by the same person or jointly with their spouse. A copy of the deed may be required if a discrepancy occurs with the information located on the databases available to the permitting clerk and the applicant for the permit.
- The owner must own and occupy the structure for a period of one year. It cannot be rented, sold or leased for a minimum of one year after the date of the certificate of occupancy was issued.
- All other laws and regulations from all agencies having jurisdiction must be followed for every project. (i.e. An affidavit is required for residential permits that has to be sent to the NC general contractors board)

STATE OF NORTH CAROLINA

OWNER EXEMPTION AFFIDAVIT
PURSUANT TO G.S. 87-14 (a) (1)

COUNTY OF LINCOLN

Lincoln County Planning & Inspections Department

Parcel Identification Number and address where the building is to be constructed: PIN_____

Address_____

Type of construction: Residential Commercial Industrial Other

Intended use after completion (e.g. Personal residence): _____

Building permit number associated with this application: _____

I, _____ (_____) _____
(Print Full Name) (Phone Number)

hereby claim exemption from licensure under G.S. 87-1(b)(2) by **initialing** the relevant provision in paragraph 1 and **initialing** paragraphs 2-5 below attesting to the following:

1. _____ I certify I am the owner of the property set forth above on which a building is to be constructed or altered and for which application for a building permit is hereby made;

OR

_____ I am legally authorized to act on behalf of the firm or corporation that is constructing or altering this building on the property owned by the firm or corporation as set forth above:

_____ (Name of Firm or Corporation)

2. _____ I will personally superintend and manage all aspects of the construction or alteration of the building and that duty will not be delegated to any person not duly licensed under the terms of Article 1, Chapter 87 of the General Statutes of North Carolina.

3. _____ I will be on site regularly during construction and I will be personally present for all inspections required by the North Carolina State Building Code, unless the plans for the construction or alteration of the building were drawn and sealed by an architect licensed pursuant to Chapter 83A of the General Statutes of North Carolina.

4. _____ I understand that by executing this licensing exemption AFFIDAVIT pursuant to G.S. 87-1(b)(2), I am required by law to occupy the building for which the licensing exemption is granted for twelve months after completion, during which time it may not be offered for rent, lease or sale.

5. _____ I understand a copy of this AFFIDAVIT will be transmitted to the North Carolina Licensing Board for General Contractors for verification I am validly entitled to claim an exemption under G.S. 87-1(b)(2) for the building construction or alteration specified herein. I further understand if the North Carolina Licensing Board for General Contractors determines I am not entitled to claim this exemption the building permit issued for the construction or alteration specified herein shall be revoked pursuant to G.S 160D-1115.

_____ (Signature of Affiant)

_____ (Date)

Sworn or affirmed and subscribed before me this _____ day of _____, 20____

_____ (Signature of Notary Public)

(Notary Stamp or Seal)

_____ (Printed Name of Notary Public)

(NOTE: It is a class F felony to willfully commit perjury in any affidavit taken pursuant to NC G.S. 14-209)

APPENDIX D
AFFIDAVIT OF WORKERS' COMPENSATION COVERAGE
N.C.G.S. §87-14

The undersigned applicant for Building Permit # _____ being the

Contractor: _____

Owner: _____

Officer/Agent of the Contractor or Owner: _____

Do hereby aver under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:

- has/have three (3) or more employees and have obtained workers' compensation insurance to cover them,
- has/have one or more subcontractor(s) and have obtained workers' compensation insurance to cover them,
- has/have one or more subcontractor(s) who has/have their own policy of workmen's compensation covering themselves,
- has/have not more than two (2) employees and no subcontractors,

while working on the project for which this permit is sought. It is understood that the Inspection Department issuing the permit may require certificates of coverage of workers, compensation insurance prior to issuance of the permit and at any time during the permitted work from any person, firm or corporation carrying out the work.

Firm name: _____

By: _____

Title: _____

Date: _____

***** MUST Be Signed By Property Owner *****

**LINCOLN COUNTY
VOLUNTARY AGRICULTURAL DISTRICT
BUILDING PERMIT REGISTRATION**

I have reviewed the most current Lincoln County Agricultural Districting Map found at the Register of Deeds Office or Building & Land Development. I understand that activities such as pesticide spraying, manure spreading, machinery operations, livestock operations, logging and other common farming and forestry activities may occur at any time in these areas.

Location of Property (Parcel ID, Subdivision or Address):

Print Name: _____

Signature: _____ Date: _____

Return to: Lincoln Soil & Water Conservation District
115 West Main Street, Citizens Center
Lincolnton, N.C. 28092