

YANCEY COUNTY BUILDING CHECKLIST: NEW CONSTRUCTION

Property Owner \_\_\_\_\_ Previous Owner \_\_\_\_\_

Phone # \_\_\_\_\_ Cell # \_\_\_\_\_

PIN# \_\_\_\_\_ LOCATION \_\_\_\_\_

**ALL THE FOLLOWING INFORMATION MUST BE PROVIDED BEFORE A BUILDING PERMIT WILL BE ISSUED.**

BUILDING DEPARTMENT	INITIAL	DATE	NOTES
Flood Plain Application COMPLETED			
Watershed Application COMPLETED			

ENVIRONMENTAL HEALTH	INITIAL	DATE	NOTES
Authorization to Construct Spetic System			
Water Source: (CHECK ONE) **NEW WELL _____ EXISTING WELL _____ SPRING _____			
City Water/Sewer Certification			

911 OFFICE	Initial	Date	NOTES
PIN# Assigned			PIN#:
911 ADDRESS Assigned (Permanent Address)			

BUILDING DEPARTMENT	INITIAL	DATE	NOTES
Lein Agent			
Workers' Compensation			
Owner/Builder Affidavit			
Residential Drawings (with measurements )			
Commercial Drawings Stamped with square footage			

Property Owner/Representative: \_\_\_\_\_ Date: \_\_\_\_\_

Building Department Representative: \_\_\_\_\_ Date: \_\_\_\_\_

\* No CO will be issued until a well head completion has been done by Environmental Health for NEW WELLS ONLY.

RESIDENTIAL BUILDING PERMIT YANCEY COUNTY BUILDING INSPECTIONS DEPARTMENT  
CUSTOM BUILT ON LOT OR MODULAR

OWNER \_\_\_\_\_ DATE \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_ TELEPHONE \_\_\_\_\_

BUILDING LOCATION/DIRECTIONS \_\_\_\_\_

PIN NUMBER \_\_\_\_\_ ACREAGE \_\_\_\_\_

TOWN JURISDICTION:  Y  N TOWN APPROVALS:  Y  N TOWNSHIP: \_\_\_\_\_

OCCUPANCY: SINGLE FAMILY  MULTI-FAMILY  COMMERCIAL

TYPE OF WORK: NEW  ADDITION  RENOVATION  CHANGE OF USE  DEMOLITION  REPAIR  UPFIT

USE OF PROPERTY: OWNER OCCUPIED  RENTAL  SALE  LIEN AGENT NUMBER: \_\_\_\_\_

PROJECT DESCRIPTION \_\_\_\_\_

TOTAL ESTIMATED COST OF PROJECT \_\_\_\_\_ NO. OF STORIES \_\_\_\_\_

CONSTRUCTION TYPE \_\_\_\_\_

LENGTH \_\_\_\_\_ WIDTH \_\_\_\_\_ # BEDROOMS \_\_\_\_\_ BATHROOMS \_\_\_\_\_

BASEMENT \_\_\_\_\_ CRAWL SPACE \_\_\_\_\_ SLAB \_\_\_\_\_ BASEMENT FINISHED YES  NO

DWELLING SQ. FT. \_\_\_\_\_ GARAGE SQ. FT. \_\_\_\_\_ TOTAL SQ. FT. \_\_\_\_\_

PERMIT COST: Bldg: \_\_\_\_\_ Total: \_\_\_\_\_

GENERAL CONTRACTOR \_\_\_\_\_ LICENSE NO. \_\_\_\_\_

Contact Number \_\_\_\_\_ Address \_\_\_\_\_

SUB CONTRACTORS:

ELECTRICAL CONTRACTOR \_\_\_\_\_ LICENSE NO. \_\_\_\_\_

Contact Number \_\_\_\_\_ Address \_\_\_\_\_

PLUMBING CONTRACTOR \_\_\_\_\_ LICENSE NO. \_\_\_\_\_

Contact Number \_\_\_\_\_ Address \_\_\_\_\_

MECHANICAL CONTRACTOR \_\_\_\_\_ LICENSE NO. \_\_\_\_\_

Contact Number \_\_\_\_\_ Address \_\_\_\_\_

GAS CONTRACTOR \_\_\_\_\_ LICENSE NO. \_\_\_\_\_

Contact Number \_\_\_\_\_ Address \_\_\_\_\_

The undersigned hereby certifies that he/she is the contractor and authorized agent of the owner and the above information is correct to the best of his/her knowledge and hereby makes application for a permit and inspection of work described above. All work will be done in accordance with all applicable State and local laws and regulations.

Signature \_\_\_\_\_ Date \_\_\_\_\_ Printed name \_\_\_\_\_

APPROVED BY: \_\_\_\_\_ DATE \_\_\_\_\_ PERMIT NUMBER: \_\_\_\_\_

YANCEY CO BUILDING INSPECTOR  
202 MEDICAL CAMPUS DRIVE  
BURNSVILLE NC 28714  
828-632-7833

04/2019

The following must be turned in with plans at the time of building permit application.

BUILDING

FOOTING: DEPTH \_\_\_\_\_ WIDTH \_\_\_\_\_  
REINFORCEMENT \_\_\_\_\_

FOUNDATION WALL: TYPE \_\_\_\_\_  
SIZE \_\_\_\_\_  
AMOUNT OF BACKFILL \_\_\_\_\_

FRAMING:

FLOOR JOIST: TRUSS \_\_\_\_\_ 2X \_\_\_\_\_  
TGI \_\_\_\_\_  
SPACING \_\_\_\_\_ OC

WALLS: 2X \_\_\_\_\_ SPACING \_\_\_\_\_ OC

ROOF/CEILING: TRUSS \_\_\_\_\_ 2X \_\_\_\_\_  
TGI \_\_\_\_\_  
SPACING \_\_\_\_\_ OC

LOG HOME: LOG SIZE \_\_\_\_\_

DECK: FOOTER SIZE \_\_\_\_\_

POST SIZE \_\_\_\_\_

JOIST SIZE \_\_\_\_\_

IN ALL APPLICATIONS IF A DESIGN IS PROVIDED IT MUST BE SEALED BY A NORTH CAROLINA REGISTERED DESIGN PROFESSIONAL.

ELECTRICAL

AMPERE SERVICE: \_\_\_\_\_

TYPE: UNDERGROUND \_\_\_\_\_ OVERHEAD \_\_\_\_\_

PREMISE OR ACCOUNTY NUMBER: \_\_\_\_\_

French Broad Electric \_\_\_\_\_  
Progress Energy \_\_\_\_\_  
Haywood Electric \_\_\_\_\_

PLUMBING

NUMBER OF FIXTURES: \_\_\_\_\_

SEPTIC APPROVED FOR \_\_\_\_\_ NUMBER OF BEDROOMS

Septic (new) \_\_\_\_\_  
Septic (existing) \_\_\_\_\_  
Town Sewer \_\_\_\_\_

HEATING

TYPE OF HEAT: Electric \_\_\_\_\_

Gas: LP \_\_\_\_\_ Natural \_\_\_\_\_

Oil \_\_\_\_\_ Wood \_\_\_\_\_

FIREPLACE: Yes \_\_\_\_\_ No \_\_\_\_\_

MASONRY \_\_\_\_\_ INSERT \_\_\_\_\_ GAS \_\_\_\_\_

RESCHECK: YES \_\_\_\_\_ NO \_\_\_\_\_ (REQUIRED FOR ALL LOG HOMES)

INSULATION TYPE: \_\_\_\_\_

R-VALUES: FLOOR \_\_\_\_\_

CEILING \_\_\_\_\_

WALLS \_\_\_\_\_

YANCEY COUNTY BUILDING INSPECTIONS DEPARTMENT  
LIEN AGENT INFORMATION

You can get a LIEN AGENT by going to [www.liensnc.com](http://www.liensnc.com)  
SEE COMPLETE DETAILS ON LIEN AGENT APPOINTMENT ON THE BACK OF THIS FORM

EFFECTIVE APRIL 1, 2013

In accordance with North Carolina General Assembly Session Law 2012-158, Inspection Departments are not allowed to issue any permit where the project cost is \$30,000 or more unless the application is for improvements to an existing dwelling that the applicant uses as a residence OR the property owner has designated a lien agent and provided the inspections office with the information below:

Name of Lien Agent: \_\_\_\_\_ Lien Agent #: \_\_\_\_\_

Mailing Address of Agent: \_\_\_\_\_

Physical address of Agent: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

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

CONTRACTOR AND CONSTRUCTION SITE INFORMATION

Name of Contractor and/or Owner: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Construction Site Address and/or parcel #: \_\_\_\_\_

I certify that to the best of my knowledge, the above statements provided are true and correct.

Signature of Contractor/Owner: \_\_\_\_\_ Date: \_\_\_\_\_

The Information will be attached to the permit record and a copy provided to the applicant. The applicant is required to post a copy on the construction site. For further information regarding the Lien Agent process you may visit [liensnc.com](http://liensnc.com) or contact Nancy Ferguson at 800-445-9983 or email her at [Nancy.Ferguson@cit.com](mailto:Nancy.Ferguson@cit.com)  
Excerpt from North Carolina G.S. 153A-357:

(Effective April 1, 2013) No permit shall be issued pursuant to subdivision (1) of subsection (a) of this section where the cost of the work is thirty thousand dollars (\$30,000) or more, other than for improvements to an existing single-family residential dwelling unit as defined in G.S. 87-15.5(7) that the applicant uses as a residence, unless the name, physical and mailing address, telephone number, facsimile number, and electronic mail address of the lien agent designated by the owner pursuant to G.S. 44A-1.1.1(a) is conspicuously set forth in the permit or in an attachment thereto. The building permit may contain the lien agent's electronic mail address. The lien agent information for each permit issued pursuant to this subsection shall be maintained by the inspection department in the same manner and in the same location in which it maintains its record of building permits issued.

YANCEY COUNTY BUILDING INSPECTIONS  
AFFIDAVIT OF WORKERS' COMPENSATION

The undersigned applicant for Building Permit Number \_\_\_\_\_ being  
( ) Unlicensed ( ) Owner ( ) Officer/Agent of the Contractor or Owner --  
LICENSE NUMBER \_\_\_\_\_

Do hereby swear under penalties of perjury that the person(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 subcontractors and have obtained workers' compensation  
insurance to cover them

\_\_\_\_\_ has/have one or more subcontractor(s) who has/have no employees and has waived in  
writing their right to coverage by their contractor or have their own policy of workers'  
compensation covering them

\_\_\_\_\_ has/have not more than two (2) employees and no subcontractors

\_\_\_\_\_ has/have paid the licensing tax for General Contractor's as required by the Revenue Act  
of the State of NC and obtained a state bidders license.

\_\_\_\_\_ have/has applied for a permit where the cost is under \$30,000 and is therefore exempt  
from Licensed General Contractor requirements specified by G.S. 87-14

\_\_\_\_\_ has/have applied for a permit under owner exception to the licensing requirements and  
have completed a OWNER EXEMPTION AFFIDAVIT (mandating occupancy if the premise  
for 12 months following completion of the project if the project value exceeds \$30,000).

While working on this project for which this permit is sought. It is understood that the Yancey County Building  
Inspections office may require certificates of coverage and/or waivers of workers' compensation insurance coverage  
prior to issuance of the permit. This document must be signed by the person, firm or corporation appearing as the  
contractor on the building permit. Signatures are to be witnessed by Inspections personnel or notarized.

COMPANY NAME \_\_\_\_\_ SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

WITNESSED BY YCBI REPRESENTATIVE \_\_\_\_\_ on \_\_\_\_\_ or

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 2020.

\_\_\_\_\_  
Official Seal Notary Public

Signature of Notary

My Commission Expires \_\_\_\_\_, 20\_\_\_\_\_

COUNTY OF YANCEY

YANCEY COUNTY BUILDING 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. 153A-362 or G.S. 160A-422.

\_\_\_\_\_  
(Signature of Affiant) \_\_\_\_\_ (Date)

Sworn or affirmed and subscribed before me this the \_\_\_\_\_ 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)