

TOWN OF BLACK MOUNTAIN PLANNING AND DEVELOPMENT SERVICES

ACCESSORY STRUCTURE PERMIT APPLICATION

Town of Black Mountain
160 Midland Avenue,
Black Mountain, NC 28711
Phone: 828-419-9300 ~ Fax: 828-669-2030
www.townofblackmountain.org

PERMIT #: _____
() Residential () Commercial
() Flood Zone Elevation: _____
() Slope: _____

By signing this permit, you consent to the entry on the permitted premises by Building Inspectors of the Town of Black Mountain to determine compliance with all codes. This consent is valid for the period commencing with the issuance of this building permit approval and terminating with the issuance of a certificate of occupancy or until earlier if revoked in writing by the owner of the property.

Owner Name: _____ Owner Phone #: _____

Owner Address: _____

Project Address: _____ PIN #: _____

Please attach if applicable:

- Two (2) sets of plans
Site Plan
Zoning Approval
Stream Buffer Shown

Zoning Administrator Signature: _____ Date: _____

Description of Job: _____

Areas: _____ Project Cost: \$ _____

Covered Unheated: _____

Covered Heated: _____

Contractor Information:

Name: _____ Phone: _____ License #: _____

Name: _____ Phone: _____ License #: _____

Signature: _____ Date: _____

Contractor

Signature: _____ Date: _____

Owner

Office Use Only

Building: _____

Zoning: _____

Electrical: _____

Total Fees: _____

Cash: _____ Check #: _____ Credit: _____

Approved by: _____ Date: _____

A FINAL INSPECTION must be scheduled at the completion of the project