

**COUNTY OF WAYNE
APPLICATION FOR MECHANICAL PERMIT**

Applicants Name(s): _____ Applicants Phone # _____

Project Address: _____ Lot Number: _____

Project type Residential: ☐ New or ☐ Existing, ☐ Single-family home, ☐ Mobile Home, ☐ Accessory Building ☐ Modular

☐ New HVAC # of units ____ ☐ HVAC Change Out # of Units ____ ☐ Gas piping ☐ Duct work change out

Type of unit: ☐ Gas pack ☒ Split heat ☐ Heat pump package Tonnage of each unit: _____, ☐ Gas or ☐ Electric

Commercial/Industrial projects only (schools, church, business, factory) total projected Construction cost: \$ _____

For commercial/industrial projects please list type: (School, Church, Business, Factory ETC) _____

Please specify project in detail:

Contractor/Owner/Business Listing with the state: _____

Mailing Address: _____

Contractor License number: _____ Work Number: _____ Mobile number: _____

Contractor's Email Address: _____

Please Email permit application to amanda.drake@waynegov.com & katie.johnson@waynegov.com

Fee schedule-Updated July 1, 2020, A re-inspection fee of \$60.00 will be charged per re-inspections 1.5 times total permit fee. Only if work is started before the permit is issued. Wayne County Inspections Department contact information:

Mailing address: P.O. Box 227 Goldsboro ,NC 27533 Physical Address: 134 N. John St Goldsboro NC 27533 (3rd floor of the Jeffrey's Building in room 305) Phone #: (919)731-1169 Fax No: (919-)705-1815 Website: www.waynegov.com A building permit must be obtained by a contractor or home/land owner in person only. A notarized owner exemption affidavit pursuant to G.S. 87-14(A)(1) Form may also be required. Notifications from a Lien agent resulting from session law 2012-158 may also be required.

By signing this document, I agree to all the above information.

Applicant Name: _____

Applicant Signature: _____

Date: _____

(Only put card information if you do not want to pay in person)

I _____ Hereby authorize the Wayne County Inspections Department to charge the permit fee to my credit card.

(Credit card payment (VISA OR MASTERCARD ONLY)) Credit Card number: _____

Expiration date (MM/YY): _____ three-digit CVV/V-CODE on the back of the credit card: _____