



City of Greensboro: Development Services
Residential Building Permit Application
 300 W. Washington St.
 Greensboro, NC 27405
 (336) 373-2155 Fax (336) 373-3637

For review status:
www.greensboro-nc.gov/planreview

PROJECT ADDRESS: _____ **Date:** _____

Owner: _____ **Telephone:** _____

Address: _____ **City/State:** _____ **Zip:** _____

Contact Person: _____ **Telephone:** _____ **Fax:** _____

Email Address: _____

Contact Person will receive all the correspondence, notices and questions from Plan Review

Contractor Name: _____	Telephone: _____	Fax: _____
Address: _____	City/State: _____	Zip: _____
CONTRACTOR CODE #: _____	State License #: _____	Classification: _____
Design Professional: _____	PE <input type="checkbox"/>	Arch <input type="checkbox"/> Reg #: _____

Description of Work: _____ **Work Area Sq. Ft.:** _____

Property Use: Single Family Two Family Townhouse

Building Construction: Brick Veneer Frame/Siding Other _____

Is the Residence: New Existing/Renovation Addition

Number of Rooms: _____ **Number of Bedrooms:** _____ **Number of Bathrooms:** _____

Heated Area:	Basement: _____ Sq. Ft.	Unheated Area:	Basement: _____ Sq. Ft.
	1st Floor: _____ Sq. Ft.		Garage: _____ Sp. Ft.
	2nd Floor: _____ Sq. Ft.		Deck/Porch: _____ Sq. Ft.
	3rd Floor: _____ Sq. Ft.		

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

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

Utilities: **Type of Heat:** Gas Electric Other

Water: Public Private **For Private, Health Dept. Permit #:** _____

Sewer: Public Private **For Private, Health Dept. Permit #:** _____

Check if Residence Located in or Classified as: Flood Plain Fire District Overlay
 Landmark Property Local Historic District National Historic District

Construction:	Total	_____	Sub-Contractor Names:
	Electrical	_____	_____
	Plumbing	_____	_____
	Mechanical	_____	_____
	General	_____	_____

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other applicable State and local laws and ordinances and regulations. The Inspection Division will be notified of any changes in the approved plans and specifications for the project permitted herein.

Owner/Agent Signature _____