

ALEXANDER COUNTY INSPECTIONS

6125 NC Hwy 16 S Taylorsville, NC 28681 Phone: (828)632-1000 Fax: (828)632-1095

A) OWNER/APPLICANT OR AGENT INFORMATION:

1) APPLICANT: _____

ADDRESS: _____

TELEPHONE #: _____ FAX #: _____

2) PROPERTY OWNER: _____

ADDRESS: _____

TELEPHONE #: _____ FAX #: _____

B) PROPERTY INFORMATION:

1) STREET ADDRESS (if issued): _____

2) DIRECTIONS TO THE PROPERTY (from Hwy 16): _____

3) WATER/SEWER (please circle): Public Water Well Public Sewer Septic System

4) POWER COMPANY (please circle): Duke Power Energy United Blue Ridge

C) PROJECT DETAILS:

1) DESCRIPTION OF WORK: _____

2) ESTIMATED COST OF PROJECT: _____

3) TOTAL AMOUNT OF LAND AREA TO BE DISTURBED: _____

4) # PROPOSED BUILDINGS: _____ TOTAL SQUARE FOOTAGE: _____

5) TOTAL AMOUNT OF HEATED SPACE: _____ UNHEATED SPACE: _____

6) TOTAL NUMBER OF ROOMS: _____ (7) NUMBER OF BEDROOMS: _____

8) NUMBER OF BATHROOMS: _____ (9) NUMBER OF KITCHENS: _____

10) NUMBER OF STORIES: _____ (11) BASEMENT (please circle): YES NO

12) GARAGE (please circle): YES NO (13) CARPORT (please circle): YES NO

14) TYPE OF HEAT (please circle): Heat Pump Gas Other

15) SIZE OF ELECTRICAL SERVICE: _____ AMPS

D) CONTRACTORS: Please list the contractors who will be working on your project and their license number. Contractors will be required to verify with their CIN before **any inspections can be made.**

GENERAL CONTRACTOR: _____ LICENSE #: _____

ELECTRICAL CONTRACTOR: _____ LICENSE #: _____

PLUMBING CONTRACTOR: _____ LICENSE #: _____

MECHANICAL CONTRACTOR: _____ LICENSE #: _____

OTHER CONTRACTOR: _____ LICENSE #: _____

-----CONTINUE ON THE REVERSE-----

