

# TOWN OF ABERDEEN BUILDING PERMIT APPLICATION

Office Use Only

Permit # \_\_\_\_\_

Address of Project \_\_\_\_\_

(All Items listed must be provided prior to a building permit being issued)

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Water/Sewer Tap Fee Receipt           | <input type="checkbox"/> Active Aberdeen Business License   | <input type="checkbox"/> Residential- 1 set of Plans    |
| <input type="checkbox"/> Zoning Compliance Application         | <input type="checkbox"/> Copy of General Contractor License | <input type="checkbox"/> Commercial-3 sets Sealed Plans |
| <input type="checkbox"/> Affidavit of Worker's Comp.(1 yearly) | <input type="checkbox"/> Site Plan                          | <input type="checkbox"/> Septic Tank (MC Health Dept.)  |

**Address of Project:** \_\_\_\_\_

Applicant: \_\_\_\_\_ Phone #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Phone #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

**UTILITIES:**     Town Water         Private Well         Town Sewer         Septic Improvement Permit

**BUILDING:**    Type of Construction: \_\_\_\_\_ Proposed Use: \_\_\_\_\_

Dimensions: \_\_\_\_\_ Heated SF: \_\_\_\_\_ # of Stories: \_\_\_\_\_

Garage SF: \_\_\_\_\_ Basement: \_\_\_\_\_ Porch SF: \_\_\_\_\_ Deck: \_\_\_\_\_ Patio: \_\_\_\_\_

Install Insulation: Yes No    Estimated Cost of Construction: \_\_\_\_\_

**MECHANICAL:**    Residential \_\_\_\_\_ Commercial \_\_\_\_\_

Type of System: \_\_\_\_\_ # of Systems: \_\_\_\_\_ Tons: \_\_\_\_\_

Gas Line: Yes \_\_\_\_\_ No \_\_\_\_\_

**PLUMBING:**    Total # of Fixtures \_\_\_\_\_ Total # of Bathrooms: \_\_\_\_\_

Sinks: \_\_\_\_\_ Water Closets: \_\_\_\_\_ Showers: \_\_\_\_\_ Tubs: \_\_\_\_\_ Clothes Washers: \_\_\_\_\_

Dishwasher: \_\_\_\_\_ Wet Bar: \_\_\_\_\_ Spa: \_\_\_\_\_ Water Heater: \_\_\_\_\_

Irrigation System: Yes \_\_\_\_\_ No \_\_\_\_\_

(State requires all irrigation systems to be connected to a water only meter and a RPZ valve to be installed)

**ELECTRICAL:**    Residential \_\_\_\_\_ Commercial \_\_\_\_\_ # AMPS: \_\_\_\_\_ # of Disconnect: \_\_\_\_\_

Temporary Pole: Yes \_\_\_\_\_ No \_\_\_\_\_

I, the undersigned, hereby make application for permits, inspection of work described and agree to comply with all applicable laws regulating the work I have also received a copy of this document and I understand that it is my responsibility to maintain current signatures and license numbers on file of the respective contractors shown below and to notify the Town of Aberdeen of any changes prior to any rough-in inspections. I further understand that all inspection requests are to be made by me or my agent to the Town of Aberdeen Planning and Inspections Department and that the septic operating permit, where required, must be provided before a Certificate of Occupancy is issued.

General Contractor: \_\_\_\_\_ License #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone #: \_\_\_\_\_ Aberdeen Business License #: \_\_\_\_\_

On-site Contact: \_\_\_\_\_ Cell Phone#: \_\_\_\_\_ Email: \_\_\_\_\_

Electrical Sub.: \_\_\_\_\_ License #: \_\_\_\_\_ Aberdeen B. L. #: \_\_\_\_\_

Plumbing Sub.: \_\_\_\_\_ License #: \_\_\_\_\_ Aberdeen B.L. #: \_\_\_\_\_

Mechanical Sub.: \_\_\_\_\_ License #: \_\_\_\_\_ Aberdeen B.L. #: \_\_\_\_\_

Gas Line Sub: \_\_\_\_\_ License #: \_\_\_\_\_ Aberdeen B.L. #: \_\_\_\_\_

Irrigation Sub.: \_\_\_\_\_ License #: \_\_\_\_\_ Aberdeen B.L. #: \_\_\_\_\_

Builders Signature

Date

Building Inspector

Date