



This document is effective December 1, 2009
All previous versions are expired

TOWN OF HOLDEN BEACH

BUILDING PERMIT APPLICATION

Office Only:

*** All information on this application must be filled out completely. Information that does not apply must show n/a. Incomplete applications shall be returned without being processed.**

A zoning permit application must be submitted prior to or at the same time as the application.

PROPERTY OWNER INFORMATION:

Name: _____
Holden Beach Property Address: _____
Lot Number: _____ Subdivision: _____
Permanent Mailing Address:
Street Address: _____
City/State/Zip: _____
Home Phone: _____ Beach House Phone: _____
Cellular Phone: _____ Fax: _____
Email: _____

CONTRACTOR INFORMATION:

Business Name: _____ Qualifier: _____
Mailing Address:
Street Address: _____
City/State/Zip: _____
Phone: _____ Cellular Phone: _____
Fax: _____ Email: _____
N.C. State Contractor's License Number: _____
Workman's Compensation Number (Attach Copy): _____
Current Holden Beach Privilege License Number Yes _____ No _____
Contact Person: _____
Phone: _____ Cellular Phone: _____
Fax: _____ Email: _____

ZONING: (check one)

Residential (R-1 Zone) _____ Residential (R-2 Zone) _____ Commercial (C-1 Zone) _____

FLOOD PLAIN INFORMATION:

Flood Zone Designation (X, AE, VE) _____ Base Flood Elevation _____

WORK CLASSIFICATION AND VALUE: (check one)

New _____ Addition _____ Repair _____ *List all repairs in detail on second page.*
\$ _____ \$ _____ \$ _____

PROPERTY USE: (check one)

Single Family _____ Two Family _____ Condominium _____ Townhouse _____
Commercial _____ Other _____ Description _____

ACCESSORY CONSTRUCTION: (check one)

Boatlift _____ Dock _____ Bulkhead _____ Specify Use: _____ Value: _____
Driveway _____ Square Feet _____ Specify type of material used for driveway _____

