

Application Date: _____

Application #: _____

Craven County

Planning and Inspections Department
2828 Neuse Boulevard
New Bern, NC 28562
Inspections (252) 636-4987, Fax (252) 636-4984
www.cravencountync.gov

Office Use Only	
LU Fees Paid? Yes___ No___	Amount Paid \$_____
LU SD Fees Paid? Yes___ No___	Amount Paid \$_____
EH Fees Paid? Yes___ No___	Amount Paid \$_____
Method of payment: Cash___ Check___	
Other: _____	
Disaster related? _____ Fees waived? _____	
Comments: _____	

GENERAL INFORMATION

Applicant Information

Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Home Phone: _____

Work Phone: _____ Mobile Phone #: _____ Email: _____

What name is listed with the power company?: _____

Property Owner Information (if different from above)

Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Home Phone: _____

Work Phone: _____ Mobile Phone #: _____ Email: _____

Property Information **** NOTE: An address must be assigned before proceeding with this application ****

Address: _____ Parcel ID: _____ - _____ - _____

City: _____ State Road # (if applicable): _____ Parcel size (acres): _____

Is the property located within an approved Subdivision? Yes___ No___ **Mobile Home Park?** Yes___ No___

If Yes, Name of Subdivision or MHP: _____

Lot #: _____ Section/Phase: _____ Year Recorded: _____

Did you (or the listed property owner) own this property on Jan. 1st of the previous year? Yes___ No___

****Directions**** (attach map and indicate approximate location of construction): _____

Permit Information – Please Indicate all permit(s) you are applying for:

- | | |
|---|--|
| <input type="checkbox"/> Building Inspections Permit | <input type="checkbox"/> Existing Septic Tank |
| <input type="checkbox"/> Mobile Home inspection | <input type="checkbox"/> Preliminary Tract Evaluation |
| <input type="checkbox"/> Development in a Flood Hazard Area | <input type="checkbox"/> New Septic Tank |
| <input type="checkbox"/> Well Construction Permit | <input type="checkbox"/> Flow Increase/Change in Use/
Foundation Increase affecting existing system |
| <input type="checkbox"/> Well Repair/Replacement Permit | <input type="checkbox"/> Repair of an Existing Septic Tank |
| <input type="checkbox"/> Well abandonment Permit | |

LAND USE

Proposed Development:

- New Construction
- Fill/Excavation
- Alteration/Repair
- Grading
- Subdivision (requires board approval).....# of proposed lots_____
- Mobile Home Park (requires board approval).....# of proposed lots_____
- Other (**explain in detail**): _____

Type of Construction (please check only one):

- Single-family House
- Modular Home
- Mobile Home (**If NOT in a Mobile Home Park, how many mobile homes are currently on the parcel? _____What is the total number proposed to be on the parcel?_____**)
- Commercial/Non-residential
- Multi-family Units
- Accessory Structure (**explain in detail**): _____

Size of Proposed Development: _____ft. x _____ft. **Location on property:** (* See box at top)

**** If more than one manufactured home is on one parcel of land, you may be required to follow the guidelines of the Craven County Mobile Home Park Ordinance.**

Are there any structures on the property that are to be removed or demolished? Yes___ No___

****If yes, explain in detail:** _____

NOTE: The permit applied for with this application may be in a mapped Flood Hazard Area. Determination of whether you are in the Flood Hazard Area is not determined by evaluation, but where your property is located on the flood maps. Before you make any expenditure of funds, you are advised to check with the Craven County Planning and Inspections Department to be informed of any necessary requirements. Additionally, this property may contain designated wetlands. You are advised to check with the Army Corp of Engineers to be advised of any additional necessary requirements. If permits are granted, I agree to conform to all applicable ordinances and laws of Craven County, the State of North Carolina, and applicable federal regulations that apply to the specifications or plans submitted for review. I hereby swear that the foregoing statements are accurate and correct to the best of my knowledge.

Owner/Applicant Signature _____ **Date** _____

* If you are adding on to an existing home or placing an accessory or detached structure on your property, please illustrate the proposed location in the space provided below.