

Application # \_\_\_\_\_

Special Flood Hazard Area: Yes \_\_\_ No \_\_\_

Craven County Inspections Department  
2824 Neuse Boulevard  
New Bern, NC 28562  
(252) 636-4987, Fax (252) 636-4984

www.cravencountync.gov

Craven County



**GAS LINE PERMIT APPLICATION**

Date: \_\_\_\_\_

PERMIT FEE: \$ \_\_\_\_\_

**APPLICANT/CONTRACTOR:**

Name: \_\_\_\_\_ \*Contractor License (if applicable) #: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**PROPERTY OWNER:**

Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ Phone: \_\_\_\_\_ Parcel I.D. # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**JOB INFORMATION:**

Job Site Address: \_\_\_\_\_

Directions: \_\_\_\_\_

Residential: \_\_\_\_\_ Commercial: \_\_\_\_\_ Total Contract Cost: \_\_\_\_\_

Type of Gas Piping: \_\_\_\_\_ Type of Gas System: \_\_\_\_\_

Connecting fixture(s):

Stove \_\_\_\_\_ Furnace \_\_\_\_\_ Pool Heater \_\_\_\_\_

Cook Top \_\_\_\_\_ Grill \_\_\_\_\_ Fireplace/Gas Logs \_\_\_\_\_

Oven \_\_\_\_\_ Wall Heater \_\_\_\_\_ Generator \_\_\_\_\_

Dryer \_\_\_\_\_ Gas Pack \_\_\_\_\_

Water Heater \_\_\_\_\_

Total number of fixtures to be connected \_\_\_\_\_ Fuel Gas Provider \_\_\_\_\_

IF BONDING REQUIRED WHERE LOCATED \_\_\_\_\_

Other (please explain) \_\_\_\_\_

Applicant/Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_