

# Henderson County Building Permit Application

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

Applicant (If not owner) \_\_\_\_\_ Phone # \_\_\_\_\_

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

Sub Division: \_\_\_\_\_ Lot#: \_\_\_\_\_

Type of Work:  New  Addition  Remodel  Garage

Residential  Addition/Remodel

If New:

Single Family  On Frame Modular  Off Frame Modular

Duplex  Condo/Apartment  Townhouse  Other \_\_\_\_\_

Is there an attached garage?  Yes  No

Power Company:  Duke Energy  Duke Progress

Reference # \_\_\_\_\_ (required before inspections may be sent to power company)

Water Source:  Well  HVL City  Asheville  Community

Sewer:  Septic Tank  HVL City  Cane Creek  Community

Cost of Project: \_\_\_\_\_ Heated Square Footage: \_\_\_\_\_

Exterior: \_\_\_\_\_ # of Stories \_\_\_\_\_ # Bedrooms \_\_\_\_\_ # Bathrooms \_\_\_\_\_

Unfinished Basement  Finished Basement  Partial Finished Basement

Crawl Space  Slab

Heat Source:  Heat pump  Natural Gas  LP Gas  Oil  Other \_\_\_\_\_

GC. \_\_\_\_\_ Signature: \_\_\_\_\_ License#: \_\_\_\_\_

Electrical Contractor: \_\_\_\_\_ License #: \_\_\_\_\_

HVAC Contractor: \_\_\_\_\_ License#: \_\_\_\_\_

Plumbing Contractor: \_\_\_\_\_ License#: \_\_\_\_\_

Gas Contractor: \_\_\_\_\_ License: \_\_\_\_\_

# Henderson County, NC Residential Summary Sheet

| This Box For Inspection Department Use Only |          |          |                   |           |
|---|----------|----------|-------------------|-----------|
| Received                                    | Rejected | Approved | Type Construction | Occupancy |

General Contractor's Name: \_\_\_\_\_

**General Contractors**  
Phone #: \_\_\_\_\_

General Contractors license # and his or hers Signature \_\_\_\_\_

Assigned Property Address: \_\_\_\_\_

What are you building? \_\_\_\_\_

Directions from 100 N King St

| Check all that apply:   | Fill in <u>all</u> blanks:   |
|---|--|
| <input type="checkbox"/> 1 Story <input type="checkbox"/> Basement<br><input type="checkbox"/> 1-1/2 or 2 Story <input type="checkbox"/> Crawl Space<br><input type="checkbox"/> 3 Story <input type="checkbox"/> Attached Garage | Heated Sq Ft: _____ Project Cost: _____<br># Bedrooms: _____ Altitude of project (feet) _____<br># Bathrooms: _____ Height: _____<br>Dimensions: _____ x _____ |

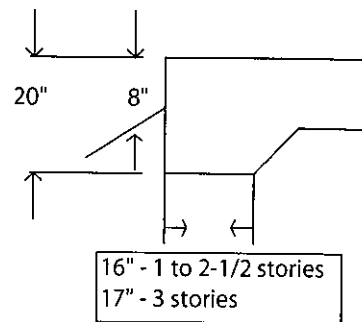
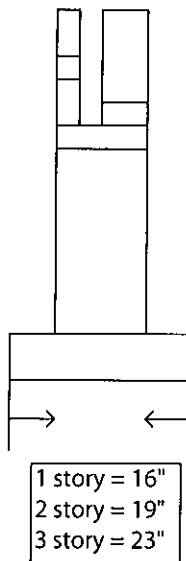
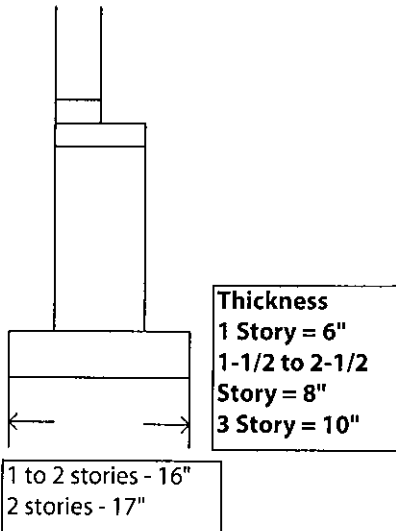
YES     NO    All walls are greater than 3 feet to a property line. (Walls within 3 feet of a property line must be one hour protected on both sides).

**Type of Construction Check one (if applicable)**

Frame on slab or foundation wall (crawl space or basement)

Frame & brick veneer on slab or foundation wall (crawl space or basement)

Monolithic slab



Other: Consult with the Building Official

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

Check the applicable boxes:

Interior Piers: None:  Yes  → Tributary Area: \_\_\_\_\_ or →  Continuous interior bearing wall

Check appropriate box




1 Story

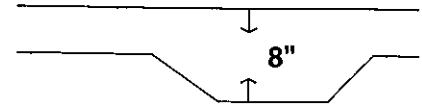
1-1/2 or 2 Story

3 Story

| Area | Pier   | Footing         |
|------|--------|-----------------|
| 100  | 8 x 16 | 1-4 x 2-0 x 8"  |
| 150  | 8 x 16 | 2-0 x 2-0 x 8"  |
| 200  | 8 x 16 | 2-4 x 2-4 x 10" |

| Area | Pier    | Footing         |
|------|---------|-----------------|
| 50   | 8 x 16  | 1-4 x 2-6 x 8"  |
| 100  | 8 x 16  | 2-0 x 2-6 x 10" |
| 150  | 16 x 16 | 2-8 x 2-8 x 10" |
| 200  | 16 x 16 | 3-0 x 3-0 x 10" |
| 250  | 16 x 16 | 3-4 x 3-4 x 12" |
| 300  | 16 x 16 | 3-8 x 3-8 x 12" |

| Area | Pier    | Footing          |
|------|---------|------------------|
| 50   | 8 x 16  | 1-4 x 2-6 x 8"   |
| 100  | 16 x 16 | 2-6 x 2-6 x 10"  |
| 150  | 16 x 16 | 3-0 x 3-0 x 10"  |
| 200  | 16 x 16 | 3-11 x 3-8 x 12" |
| 250  | 16 x 24 | 4-0 x 4-0 x 12"  |
| 300  | 16 x 24 | 4-6 x 4-6 x 12"  |



### Soil Classification

Table 401.4.1

Check one: \*

| GW, GP<br>SW, SP         | GM, GC, SM<br>SM-SC, ML  | SC, MH, ML-CL            |
|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

(a) When soil tests are required by Section R401.4, the allowable bearing capacities of the soil shall be part of the recommendations.

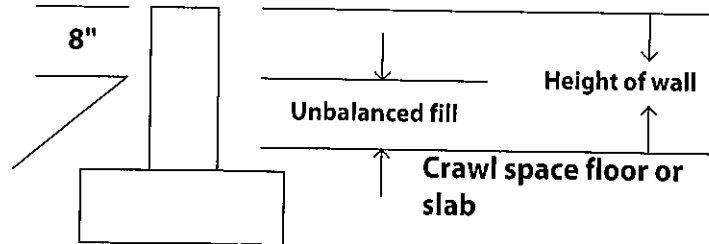
(b) Where the building official determines that in-place soils with an allowable bearing capacity of less than 2,000 psf are likely to be present at the allowable bearing capacity shall be determined by a soils investigation (engineered)

| CLASS OF MATERIAL   | LOAD-BEARING PRESSURE<br>(pounds per square foot) (a) |
|---|---|
| Crystalline bedrock   | 12,000  |
| Sedimentary and foliated rock   | 6,000   |
| Sandy gravel and/or gravel (GW and GP)  | 5,000   |
| Sand, silty sand, clayey sand, silty gravel and clayey gravel (SW, SP, SM, SC, GM and GC) | 3,000   |
| Clay, sandy clay, silty clay, clayey silt and sandy silt (CI, ML, MH and CH)              | 2,000 (b)   |

For SI: 1 pound per square foot = 0.0479 kN/m<sup>2</sup>

### Foundation Walls

| Height of wall<br>(feet) | Unbalanced Fill<br>(feet) |
|--------------------------|---------------------------|
| <input type="checkbox"/> | <input type="checkbox"/>  |



### FOUNDATION WALL DETAILS ---- Check the appropriate boxes:

| Thickness of wall | Table 404.1.1(1)         |                          | Steel Reinforced concrete or block wall * |
|-------------------|--------------------------|--------------------------|---|
|                   | Concrete wall            | Block wall               |   |
|                   |                          | Hollow                   |   |
| 6"                | <input type="checkbox"/> | <input type="checkbox"/> | N/A                                       |
| 8"                | <input type="checkbox"/> | <input type="checkbox"/> | Table 404.1.1(2)                          |
| 10"               | <input type="checkbox"/> | <input type="checkbox"/> | Table 404.1.1(3)                          |
| 12"               | <input type="checkbox"/> | <input type="checkbox"/> | Table 404.1.1(4)                          |

\* Fill in applicable box for steel reinforcing

| Reinforcing Steel | Distance apart      |
|-------------------|---------------------|
| #4                | @ _____ inches o.c. |
| #5                | @ _____ inches o.c. |
| #6                | @ _____ inches o.c. |
| #7                | @ _____ inches o.c. |