



IREDELL COUNTY DEVELOPMENT SERVICES

PO BOX 788 - STATESVILLE NC 28687

349 N CENTER ST / BUILDING STANDARDS CENTER

Central Permitting: 704-878-3113 Commercial Plans: 704-928-2021

Fax: 704-878-3171 www.co.iredell.nc.us Fax: 704-878-3122

VENTILATION PERMIT APPLICATION

Application /
Project #: _____ CID/EFT # _____ Date: _____

Property Owner: _____ Contact #: _____

Project Address: _____

Parcel Identification #: _____

Mechanical Contractor: _____
Contractor name / Company name MUST be exactly as listed with the license board.

Contractor License #: _____ Contact #: _____

Email address: _____ Fax #: _____

Contractor Address: _____

Brief Description of Work: _____

Estimated cost: _____

of hood systems: _____

Other: _____

I hereby certify that all information in this application is correct and all work will comply with the state code and all other applicable state and local laws, ordinances and regulations. The inspection department will be notified of any changes in the approved plans and specifications for the project permitted herein. This application becomes a permit only when validated and approved.

SIGNATURE OF MECHANICAL CONTRACTOR: _____

A non-refundable application fee of \$77.25 is included in the charges on all permits.