



# Gates County

Inspection Department  
PO Box 411 Gatesville, NC 27938  
OFFICE 252-357-0122 FAX 252-357-0073

## FIRE INSPECTION APPLICATION

### Contact Information

APPLICANT: \_\_\_\_\_ PROPERTY OWNER: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Cellphone: \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_

PARCEL #: \_\_\_\_\_ Subdivision: \_\_\_\_\_

**TYPE OF APPLICATION** (Check all that apply)     NEW STRUCTURE     EXISTING STRUCTURE

<p><b>Project Classification</b></p> <p><input type="checkbox"/> Abandon/Vacant    <input type="checkbox"/> Commercial</p> <p><input type="checkbox"/> Business    <input type="checkbox"/> Assembly/Educational</p>	<p><input type="checkbox"/> Daycare/Foster Care    <input type="checkbox"/> Restaurant    <input type="checkbox"/> Merchant    <input type="checkbox"/> Business    <input type="checkbox"/> Church/Assembly</p> <p><input type="checkbox"/> OTHER: _____</p>
<p><b>Additional Project Information</b></p>	<p>_____</p> <p>_____</p>

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority opt violate of cancel the provisions of any other state or local law regulation construction or the performance of construction.

PRINT NAME OF APPLICANT _____	SIGNATURE OF APPLICATION _____	DATE _____	Permit Staff Initials _____
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**Re-Inspection Fee \$50-1<sup>st</sup>, \$50.00 2<sup>nd</sup>, \$100.00 3<sup>rd</sup>, \$150.00- 4<sup>th</sup>, ect. Re-inspection same day \$100.00**

### FOR OFFICIAL USE ONLY

FEE PAID (\$50.00) \_\_\_\_\_

PERMIT ISSUED-DATE: \_\_\_\_\_