



**TOWN OF BENSON**  
**PLANNING, ZONING, INSPECTIONS DEPARTMENT**  
 303 E. CHURCH ST. | BENSON, NC 27504 | 919-894-3553  
[INSPECTIONS@TOWNOFBENSON.COM](mailto:INSPECTIONS@TOWNOFBENSON.COM)

**MECHANICAL Permit Application**

GENERAL INFORMATION		OFFICE USE ONLY	
Applicant Name:		Permit Number	
Job Site Address:		Received Date	
Parcel ID:		Received By	
Subdivision:	Lot #:	Permit FEE	
Property Owner:		Property Owner Phone #:	
Property Owner Email:			
Project Contact Name:		Project Contact Phone #:	
Project Contact Email:			

PROJECT INFORMATION			
Type of Property	Type of Equipment	Unit Size in Tons	Location of Equipment
Residential: <input type="checkbox"/>	Air Handler: <input type="checkbox"/>	Existing: <input type="checkbox"/>	Attic: <input type="checkbox"/>
Non-Residential: <input type="checkbox"/>	Condensing Unit: <input type="checkbox"/>	New: <input type="checkbox"/>	Crawlspace: <input type="checkbox"/>
	Duct Work: <input type="checkbox"/>	BTU: <input type="text"/>	Roof: <input type="checkbox"/>
	Gas Piping: <input type="checkbox"/>		Outside: <input type="checkbox"/>
	Gas Pack: <input type="checkbox"/>		Other: <input type="checkbox"/>
	Other: <input type="checkbox"/>		

Provide a detailed project description:

CONSTRUCTION INFORMATION			
Total Sq. Ft.:	Stories:	Building Height:	PROJECT COST
Heated Sq. Ft.:	Bedrooms:	Zoning District:	
Type:	Bathrooms:	Pool:	

MANUFACTURED HOME			
Make:	Model:	Serial #:	
Year:	Single Width/Length:	Double Width/Length:	

UTILITIES			
Water: Public <input type="checkbox"/>	Private <input type="checkbox"/>	Sewer: Public <input type="checkbox"/>	Private <input type="checkbox"/>
Power Company:		Johnston Co. Well/Septic Permit #	
Power Co. Premise #:			
Gas Company:			

CONTRACTOR INFORMATION	
<b>Mechanical Contractor</b>	
DBA:	License Holders Name:
State License Number:	Address:
Phone #:	Email:
<b>Other Contractor</b>	
DBA:	License Holders Name:
State License Number:	Address:
Phone #:	Email:

**G. S. 153.A-358. Time limitations on the validity of permits. A permit issued pursuant to G.S. 163A-357 expires six months, or any lesser time fixed by ordinance of the town, after the date of issuance if the work authorized by the permit has not commenced. If after commencement the work is discontinued for a period of 12 months, the permit therefore immediately expires. No work authorized by a permit that has expired may thereafter be performed until a new permit has been secured.**

**The Undersigned does hereby certify that the information given above is correct and agrees that any construction, alteration, or placement of a building or sign shall comply with all local and state laws, the Town of Benson's Zoning Ordinance, the North Carolina State Building Code, as well as any restrictions attached. The premises may not be used for any purpose or in any manner prohibited by local ordinances and/or regulations. The applicant furthermore declares that he/she is the property owner or their authorized agent.**

Applicant Signature:	Date:
Print Name:	
Approved By:	Date: