



# Iredell County Building Standards

349 North Center Street

P.O. Box 788

Statesville, NC 28687

[Online Permitting, Plan Review and Inspection Requests](#)

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## Commercial Building Permit Application & Plan Review Worksheet

Please select project type:

### New Commercial Building

- Shell/Vanilla Shell Building  Modular Office/Classroom  Apartment/Condo  Franchise Restaurant  
 Non-Franchise Restaurant  Lodging/Hotel  Cell Tower/Antenna Replacement  Other New Building

### Existing Commercial Building

- Exterior Addition  Renovation/Upfit  Franchise Restaurant  Non-Franchise Restaurant

**Project Description:** \_\_\_\_\_  
\_\_\_\_\_

**Project Location/Address:** \_\_\_\_\_

**Work Area (Sq. Ft.):** \_\_\_\_\_ **Gross Building Area (Sq. Ft.):** \_\_\_\_\_

**Construction Value:** \_\_\_\_\_ **Parcel ID:** \_\_\_\_\_

**Number of Stories:** \_\_\_\_\_ **Does Building have a Fire Alarm:** Yes  No

**Sprinkler System Type:**  NFPA 13  NFPA 13R  NFPA 13D  Non-Sprinklered

**Number of Tenant Spaces:** \_\_\_\_\_

### Site Development:

**Water Service Type:**  Public Water  Community Well  Public Well

**Sewer Service Type:**  Public Sewer  Community Septic  Private Sewer

**Project Name:** \_\_\_\_\_

**Existing Area of Land Disturbance (sq. ft.):** \_\_\_\_\_ **Existing Impervious Area (sq. ft.):** \_\_\_\_\_

**Proposed Impervious Area (sq. ft.):** \_\_\_\_\_ **Has TRC Approved Site (Statesville):** Yes  No

**Total Number of Parking Spaces:** \_\_\_\_\_ **Number of Handicap Spaces:** \_\_\_\_\_

**Landscape Required:** \_\_\_\_\_

**Will this space be rented or leased once construction is completed:** Yes  No

**Project Lead:** \_\_\_\_\_

Design Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

e-mail address: \_\_\_\_\_

**Contractor Name:** \_\_\_\_\_

Contractor License: \_\_\_\_\_ Level: \_\_\_\_\_ Phone: \_\_\_\_\_

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

E-mail address: \_\_\_\_\_

*\* A General Contractor is not required for application submittal, but must be added as a Contact on the project prior to permit issue.*

**Please Complete this Portion for the following Project types:**

**Cell Towers:**

Overall Height of Tower: \_\_\_\_\_ Directions from the Point of Access: \_\_\_\_\_

**Apartments/Condos:**

Is there a House Meter: Yes  No  Total Number of Units: \_\_\_\_\_

Number of Meter Banks	Number of Units on Meter Bank

**For projects valued \$30,000 or more: all of the following documents must be submitted prior to permit issue**

- [Worker's Compensation Affidavit](#)
- Copy of [Designated Lien Agent](#)
- Notarized [Owner Exemption Affidavit](#) *\*If property owner is permitted to act as contractor*

**Sub-Contractor Information**

Please provide the Contact Information for all Trade Sub-Contractors. Sub-Contractors will be required to submit a sub-contractor application for license validation. Please ensure you provide the building permit number to sub-contractor applicants.

**Electrical Contractor**

Estimated Cost: \_\_\_\_\_

Size of Service: \_\_\_\_\_ Service Change: Yes  No

Name of Electric Utility Company: \_\_\_\_\_

Portion of LV work being performed: \_\_\_\_\_

Sub-Contractor Name: \_\_\_\_\_

Sub-Contractor Address: \_\_\_\_\_

E-mail address: \_\_\_\_\_ Phone: \_\_\_\_\_

**Mechanical Contractor**

Estimated Cost: \_\_\_\_\_ Heating System Type: \_\_\_\_\_

Number of Systems: \_\_\_\_\_

Heating System Type:  Electric  Geothermal  LP Gas  Natural Gas  Other: \_\_\_\_\_

Sub-Contractor Name: \_\_\_\_\_

Sub-Contractor Address: \_\_\_\_\_

E-mail address: \_\_\_\_\_ Phone: \_\_\_\_\_

**Plumbing Contractor**

Estimated Cost: \_\_\_\_\_

Sub-Contractor Name: \_\_\_\_\_

Sub-Contractor Address: \_\_\_\_\_

e-mail address: \_\_\_\_\_ Phone: \_\_\_\_\_

**Gas Piping Contractor**

Estimated Cost: \_\_\_\_\_ Number of Outlets: \_\_\_\_\_

Sub-Contractor Name: \_\_\_\_\_

Sub-Contractor Address: \_\_\_\_\_

e-mail address: \_\_\_\_\_ Phone: \_\_\_\_\_

**Additional Trade Work anticipated for this project (Check all that apply):**

*Separate sub-contractor applications must be submitted and approved by this office prior to each additional trade work commencing.*

- Refrigeration    Low Voltage Phone/Data    Low Voltage Alarm/Fire    Kitchen Hood    Ventilation

**Per Scope of work,** *All of the following documents must be submitted before staff will begin the plan review process. Please indicate if documents will be submitted as hard copy or electronically.*

- Scaled Civil Drawings
- Completed Building Code Summary (Appendix "B") & Life Safety Plan
- Foundation Plan Drawings
- Structural Design and/or Pre-engineered Building Drawings
- Architectural Plan, Schedules, and Accessibility/ Egress Drawings
- Plumbing, Mechanical and Electrical Drawings

Method of Delivery:

- In Person    Mail/Courier    email PDF Attachment    Citrix Sharefile (Contact for upload link)

Separate Plan Review Fees will be invoiced and must be paid prior to each departmental review. Building permit fees are calculated by square footage of work area, or construction value depending on the scope of work, and must be paid prior to permit issue. Grading permit fees are required for all new principle structures. Temporary power fees are required for new commercial building projects and upfit/alterations. The fee for temporary power may be waived in instances of upfit or alterations projects within occupied structures currently served by permanent power. A non-refundable application fee of \$77.25 is included in the charges on all permits.

I hereby certify that all information in this application is correct and all work with 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 Contractor: \_\_\_\_\_



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## Construction Document Submission Transmittal Form

Please complete this document as a coversheet when submitting a construction project for review. Include this form when prompted to upload plans for permit [application via CSS](#) or, should you choose to do so, when applying in person. The contacts listed should be members of the project design team or coordinating the application process.

I intend to upload Construction Documents with my application for a building project [online](#).

The contacts listed below should be members of the project design team or individuals responsible for coordinating the application process. The contacts identified are then responsible for applying for an account in CSS – or being certain their account

- All documents uploaded for review should be formatted in [PDF](#).
- Please upload this transmittal *with* the Construction Documents in order to expedite processing of your application.

I prefer instead to submit hard copy [Construction Documents](#) on paper with [a completed application form](#) for a building project. Plans will be sent via Courier, Parcel Delivery, or be Hand Delivered. If the application is made online, review will not commence until the plans have been received, checked-in, and review fees paid.

- If you are making application online, upload this transmittal form in lieu of Construction Documents – when prompted to upload plans.
- Be aware that by proceeding in this manner, you are responsible for making separate application, plan submittals, and any necessary documentation directly to the other authorities with jurisdiction per [NCAC 101.3](#).
- When submitting by parcel or in person please include a completed printed copy of this form with the Plan submission.

**Project Name:** \_\_\_\_\_

Design Contact 1: \_\_\_\_\_ Phone: \_\_\_\_\_

Firm or Project Role: \_\_\_\_\_

e-mail address: \_\_\_\_\_

Design Contact 2: \_\_\_\_\_ Phone: \_\_\_\_\_

Firm or Project Role: \_\_\_\_\_

e-mail address: \_\_\_\_\_

Number of Files or Documents Uploaded: \_\_\_\_\_

Any Additional Notes: \_\_\_\_\_

\_\_\_\_\_