

Permit Application
PLAN MODIFICATION



To Permit # _____ - _____

Town of Apex
Inspection Division
Phone 919-249-3418 Fax 919-249-3407

THE PURPOSE OF THIS APPLICATION IS FOR MODIFICATIONS TO THE APPROVED PLANS ONLY - NEW WORK WILL REQUIRE A NEW PERMIT APPLICATION

Application Date _____
Applicant Name _____ Phone _____ Fax _____
Project Address _____ **Suite** _____ **Apex, NC** ZIP _____
Subdivision or Project Name _____ Lot Number _____
Project Contact Person _____ Phone _____ Fax _____
Email _____ Contact Preference: Phone Fax Email

Proposed Modification

- Restamp lost or damaged plans Revised truss plans
 Revision to the approved plans Restamp truss plans
 Other modification or clarification _____

Building Type

- Single-family dwelling Duplex Townhome Commercial Utility/Other

Result of the Modification

The modification results in a change of square footage. The following square footage is [added] [deleted]: _____

The modification results in a change of construction cost. The original cost is [reduced] [increased] by \$ _____

*The addition of square footage will require an additional permit fee. For one and two-family dwellings the fee is \$0.25 per square foot. For commercial projects the fee will be computed based upon the base square foot price by occupancy classification published in the current edition of the Commercial Building Permit Fee.

Applicant Statement

I hereby certify that I have the authority to make the necessary application; that all information in this application is correct and all work will comply with the State Building Code and all other applicable State and local laws and ordinances and regulations or private building restrictions, if any, which may be imposed by deed. The Inspection Department will be notified of any changes in the approved plans and specifications for the project herein.

Applicant's Name (print) _____ Signature _____ Date _____

Approvals (to be completed by the Building Division plans examiner)

Zoning Approval by (if other than signatory below) _____ Approval Date _____ Zoning District _____

Zoning Approval Type: Construction Drawings Certificate of Zoning Compliance Administrative Approval Plot Plan

Conditions: Plans required and provided Plans are not required Approve as noted Ok to issue permit

Fee Due: \$ _____ Explanation: _____

Original Construction Cost \$ _____ Final Construction Cost with consideration to the modification \$ _____

Plans Examiner's Name (print) _____ Signature _____ Date _____