

DEMOLITION PERMIT APPLICATION
North Topsail Beach
2008 Loggerhead Court
North Topsail Beach, NC 28460
910-328-1349

Please Fill out Form COMPLETELY

Permit Number	Project Address
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Owner Name _____

Mailing Address _____

Signature _____ **Telephone Number** _____

Contractor _____

Phone Number _____ **License #:** _____

Address _____

Signature _____ **Date** _____

Estimated Cost of Project _____ **Square Footage** _____

Description of Work _____

****100.00 fine for not scheduling a final inspection****

For Office use Only

Additional Comments _____

Issued By _____ **Electrical Fee** _____

Date approved _____ **Additional Fees** _____

Receipt Number _____ **TOTAL RECEIVED** _____