



# Non-Residential Permit Application

Planning and Development Customer Service Center | One Exchange Plaza, Suite 400 | Raleigh, NC 27601 | 919-996-2500

This form is required when seeking a non-residential building permit or zoning permit for development activity associated with apartments, offices, and commercial uses and Site Permit Review [Unified Development Ordinance (UDO) Section 10.2.8]. Submit applications by email to [commercialbuilding@raleighnc.gov](mailto:commercialbuilding@raleighnc.gov).

GENERAL INFORMATION	
Type of Review Service: <input type="checkbox"/> Standard Review <input type="checkbox"/> *Pony Review <input type="checkbox"/> *Express Review	Application Date:
*Project Contact:	
Email:	Phone:
Property Owner:	
Email:	Phone:
*Pony and Express Review apply to certain types of projects and require additional fees. See Commercial <a href="#">Pony Express Review</a> or <a href="#">Express Review</a> for details.	
*The name listed as project contact will be the primary contact within the <a href="#">Permit and Development Portal</a> for the submitted project.	
PROJECT INFORMATION	
Project Address:	Suite #:
Business or Tenant Name:	
Associated Site Permit Review (SPR) # if applicable:	Pin #:
<b>Select the primary type of work:</b>	
<input type="checkbox"/> Accessory Structure	<input type="checkbox"/> *Change of Use
<input type="checkbox"/> Addition	<input type="checkbox"/> Demolition
<input type="checkbox"/> Alteration/Repair	<input type="checkbox"/> *Fit-up Interior Completion
<input type="checkbox"/> Mass Grading Only	<input type="checkbox"/> Single Trade Permit
<input type="checkbox"/> New Building	<input type="checkbox"/> Site Permit Review (SPR)
<input type="checkbox"/> Retaining Wall	<input type="checkbox"/> Other _____
Provide a detailed project description:	
*Change of use should be selected if a project is a change of building occupancy or change of zoning use based on Unified Development Ordinance (UDO) Chapter 6. See <a href="#">Change of Use</a> to determine if your project qualifies.	
*Fit-up interior completion should be selected when the project is a first-generation building (or built within the last 7 years). See <a href="#">Commercial Alteration or Repair</a> for additional details.	
Additional Information	
Does this project qualify as a <a href="#">frequent transit development</a> option? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Does this project involve Wake County Environmental Health? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, provide the HSIPOP #: _____	
List the property's current use(s) and proposed use(s) according to <a href="#">UDO chapter 6</a> :	Current Use:
	Proposed Use:
Site Information	Building Information
Zoning District:	Existing Building: sq.ft.
Overlay District:	Proposed New Building: sq.ft.
Total Project: sq.ft.	Total Building: sq.ft.
Maximum Parking: spaces (UDO Sec. 7.1.2 C)	Proposed # of Stories:
Proposed Parking: spaces	<input type="checkbox"/> 2018 NC Code Building
Land Disturbance: sq.ft.	<input type="checkbox"/> 2018 Existing NC Building Code
Cost Information	
Total Construction Cost: \$	Total Electrical Cost: \$

**CONTRACTOR INFORMATION**

Contractors or contractor companies must be registered in the [Permit and Development Portal](#) before managing a project, paying fees, or scheduling inspections. See [final review](#) for project approval requirements. Use the [Contractor Addendum Form](#) if contractors are not listed on this application.

**Building**

*Contractor:	NC License #:
Email:	Phone:
Address:	

\*NC law requires appointment of a lien agent for contractors/subcontractors when they are working on a project. Lien Agent appointments are not required for improvements under \$40,000 or to the owner's existing residence, or for public building projects. [www.liensnc.com](http://www.liensnc.com)

**Electrical**

Voltage:  Over 600    600 or less    Low Voltage

Contractor:	Low Voltage Contractor:
Email:	Email:
Address:	
NC License #:	Phone:
NC License #:	Phone:

<b>Plumbing (For fuel piping work, fill out Mechanical)</b>	<b>Plumbing Utility</b>
---	-------------------------

Contractor:	Contractor:
Email:	Email:
Address:	
NC License #:	Phone:
NC License #:	Phone:

**Mechanical**

**Work Includes:**    Appliances    Ducts    Hood    Ventilation  
 Refrigeration    Fuel Piping    VIMS/Radon    Other \_\_\_\_\_

HVAC	Refrigeration
------	---------------

Contractor:	Contractor:
Email:	Email:
Address:	
NC License #:	Phone:
NC License #:	Phone:

Type of Heating: <input type="checkbox"/> Electrical <input type="checkbox"/> Gas <input type="checkbox"/> Hot Water <input type="checkbox"/> Oil <input type="checkbox"/> Other _____	Hood
---	------

Contractor:	Contractor:
Email:	Email:
Address:	
NC License #:	Phone:
NC License #:	Phone:

\*If work consists of replacement only, is the A/C unit:  
 Same type (split or package) as existing?  Yes  No  
 Same size or smaller than existing?  Yes  No  
 Located in same location as existing?  Yes  No

Air Condition Size: _____ tons	Fuel Piping
--------------------------------	-------------

Contractor:	Contractor:
Email:	Email:
Address:	
NC License #:	Phone:
NC License #:	Phone:

\*If the scope of the proposed work consists of replacement of existing mechanical equipment only and the answer to ANY of the above questions is "No" then a tier one site plan is required.

VIMS/Radon	Other: _____
------------	--------------

Contractor:	Contractor:
Email:	Email:
Address:	
NC License #:	Phone:
NC License #:	Phone:

**Fire**

Type of System(s):    Emergency Responder Radio Coverage System    Fire Alarm    Manual Standpipe  
 Alternative Fire Extinguishing Systems (i.e., Hoods)    Fire Sprinkler    Private Fire Line  
 Flammable/Combustible Liquids    Hazardous Materials    Other \_\_\_\_\_

Fire Sprinkler	Fire Alarm
----------------	------------

Contractor:	Contractor:
Email:	Email:
Address:	
NC License #:	Phone:
NC License #:	Phone:

<b>Fire Suppression</b>		Other: _____	
Contractor:		Contractor:	
Email:		Email:	
Address:		Address:	
NC License #:	Phone:	NC License #:	Phone:
<b>Site/Zoning/Other</b>			
Type of Work: <input type="checkbox"/> Landscaping <input type="checkbox"/> Parking Lot <input type="checkbox"/> Swimming Pool <input type="checkbox"/> Solid Waste/Recycling <input type="checkbox"/> Other _____			
Contractor:		NC License #:	
Email:		Phone:	
Address:			
<b>Grading</b>			
Contractor:			
Email:		Phone:	
Address:			
<b>Right-of-Way</b>			
Type of Work: <input type="checkbox"/> Driveway:		# of driveways	<input type="checkbox"/> Sidewalk: _____ linear ft.
Contractor:		Permits for work in the right-of-way cannot be issued without bond. Is the Performance Bond and General Liability on file with the City? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Email:	Phone:		
Address:			
<b>Utility: Meter</b>			
Contractor:		Meter type: <input type="checkbox"/> Individual	
Email:	Phone:	<input type="checkbox"/> Master Meter	
Address:		<input type="checkbox"/> Irrigation	
Service Type: <input type="checkbox"/> Water <input type="checkbox"/> Sewer <input type="checkbox"/> Irrigation		<input type="checkbox"/> Other _____	
<b>Utility: Stub</b>			
Contractor:		NC License #:	
Email:		Phone:	
Address:			
Choose Type	Size	Proposed Stub Location	
		Is this stub in the right-of-way? <input type="checkbox"/> Yes <input type="checkbox"/> No	
		Is this stub in the right-of-way? <input type="checkbox"/> Yes <input type="checkbox"/> No	
		Is this stub in the right-of-way? <input type="checkbox"/> Yes <input type="checkbox"/> No	
		Is this stub in the right-of-way? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>SIGNATURE</b>			
<p>The undersigned applicant hereby authorizes the filing of this application (and any subsequent revisions thereto) and confirms having obtained permission from the property owner/occupant for the application and the City's entry onto the property, if applicable. Additionally, the undersigned authorizes City of Raleigh representatives to conduct inspections or evaluations to ensure compliance with relevant laws and rules.</p> <p>Furthermore, the undersigned certifies that all information provided with this application and any attached documents is true, accurate, and complete to the best of their knowledge and belief. Any false information may result in rejection of the application or revocation of the permit or plan. The undersigned assumes sole responsibility for properly identifying and labeling all property lines and corners and ensuring site accessibility.</p> <p>The undersigned acknowledges that the application and any resulting permits or communications are subject to disclosure under the North Carolina Public Records Act. Moreover, the undersigned confirms the property owner's awareness of the application and pledges adherence to submitted plans and specifications in accordance with the City of Raleigh Unified Development Ordinance. Lastly, pursuant to state law N.C.G.S. 143-755(b1), the undersigned acknowledges that failure to respond to city requests or holding the permit application on hold for six consecutive months or more will result in the cessation of review, requiring a new application under current regulations upon resumption of processing.</p> <p>Additionally, by submitting this application, the undersigned confirms either being the property owner or an authorized party as defined by N.C.G.S. 160D-403(a), certifying the accuracy of the information provided. Acting as an authorized agent requires written permission from the property owner for the purposes of making this development approval and/or permit application. Written permission from the property owner to act as an authorized agent must be made available to the City of Raleigh upon request. False statements may lead to revocation of development approvals under N.C. Gen. Stat. § 160D-403(f).</p>			
<b>Applicant Name:</b>			
<b>Email:</b>		<b>Phone:</b>	
<b>Applicant Signature:</b>		<b>Date:</b>	