



Town of Nolensville

Application for Building Permit

(New Single Family Dwelling)

Permit No: ND - _____

Codes Department: 776-6686 776-3634 (fax)

Application must be printed and filled out completely, or permit will be denied

Applicant/Contractor	Applicant Name		Phone Number		Applicant is <input type="checkbox"/> Builder/Contractor <input type="checkbox"/> Owner <input type="checkbox"/> Other (explain)	
	Name of Contractor/Owner			Address of Contractor/Owner		Contractor License Number
	Contractor Office Phone		Contractor Cell Phone		Contractor Fax	
Job Location / Type	Job Address				Plat/Map Number	
	Subdivision:				Zoning	
	Type of Construction New Single Family Dwelling				Check List <input type="checkbox"/> County Privilege Tax Paid <input type="checkbox"/> Workman's Comp Insurance <input type="checkbox"/> Water & Sewer Tap Fee Paid <input type="checkbox"/> Copy of Contractor License <input type="checkbox"/> 2 Copies of Plot & Erosion Control <input type="checkbox"/> Erosion Prevention List <input type="checkbox"/> 2 sets of 11 x 17 House Plans <input type="checkbox"/> Inspection Requirements	
	Page/Parcel Number		Lot Number			
Size / Valuation	Finished / Un-Finished Foot Print Area		DECK <input type="checkbox"/> Yes <input type="checkbox"/> No			
	First Floor		Garage		Permit #	
	Second Floor		Front Porch		Total Square feet x \$25.00	
	Bonus Room		Rear Porch		Deck Valuation \$	
	Basement		Other			
	Total Sq. Ft.		The Town of Nolensville uses the 2012 International Residential Code Council (IRC) and the 2009 International Energy Conservation Code (IECC)			
Fees Due	Building Permit Fee \$		Make Checks Payable to: Town of Nolensville			
	Erosion Control Fee 150.00					
	Deck Permit Fee					
	Plumbing Permit Fee					
	Mechanical Permit Fee					
	Admin Fee 91.88					
	Total Check 1 \$		1. Building + Erosion Control + Deck + Plumbing + Mechanical + Admin Fee			
	75% of Impact Fee \$ 3,445.50 Total Check 2		2. 75% of Impact Fee			
25% of Impact Fee 1,148.50 Total Check 3		3. 25% of Impact Fee				
Nolensville Facilities Tax Total Check 4		4. \$1.00 per heated square foot				
TOTAL DUE: \$		NOTE: Four (4) separate checks are required				
Signature	Application is hereby made for a permit for the purpose shown on the accompanying plans, to be located as shown on the accompanying plot plan. The information given is part of this application, in reliance upon which is requested the issuance of a building permit. It is understood and agreed by this applicant, that any error, misstatement or misrepresentation, either with or without intention on the part of this applicant, such as might, or would operate to cause disapproval of the application, shall constitute grounds for the revocation of such permit.					
	I hereby certify that the information given herein is true and correct.					
Applicant's Signature _____ Date _____						

Date Paid:	Received by:
------------	--------------