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| City of Dunn Inspections Department102 N. Powell Ave. P.O. Box 1065Dunn, NC 28335Main: (910) 230-3505 Fax: (910) 230-9005www.dunn-nc.org |

**Residential Submittal Checklist**

Please **initial** the following checklist to make sure your plan submittal is complete. **Initial** N/A for items that do not apply to your project.

 Applicant Staff

 \_\_\_\_\_\_ \_\_\_\_\_\_ Complete application: Site address, general contractor’s

name or “homeowner”, individual contractor’s

information or “homeowner”, dollar totals, characteristics

of new construction, applicant signature and date.

 \_\_\_\_\_\_ \_\_\_\_\_\_\_ Two (2) sets of engineered plans with current engineer seal for the current code. (Allow 7-10 business days for review)

 \_\_\_\_\_\_ \_\_\_\_\_\_\_ One (1) site (plot) plan and full survey by licensed surveyor showing all setbacks with any flood or easement areas.

 \_\_\_\_\_\_ \_\_\_\_\_\_\_ Development Permit Application filled out correctly and completely.

 \_\_\_\_\_\_ \_\_\_\_\_\_\_ Deck specifications and plans, if applicable.

 \_\_\_\_\_\_ \_\_\_\_\_\_\_ Correct North Carolina contractor’s license, if required.

 \_\_\_\_\_\_ \_\_\_\_\_\_\_ Correct information for all trade contractors.

 \_\_\_\_\_\_ \_\_\_\_\_\_\_ Original signatures on all applications

 – NO COPIED APPLICATIONS.

 \_\_\_\_\_\_ \_\_\_\_\_\_\_ Each item on this checklist must be initialed or application will be refused. No applications will be held incomplete.

 \_\_\_\_\_\_ \_\_\_\_\_\_\_ Plans logged in (Station outside of the Inspection Department)

 \_\_\_\_\_\_ \_\_\_\_\_\_\_ I have received and read the information in this Homeowners Guide to New Single Family Dwellings.

Applicant Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Staff Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_