



**COMMERCIAL**  
**PERMIT APPLICATION**

Town of Wake Forest Planning Department  
301 Brooks Street  
Wake Forest, NC 27587  
Main: (919) 435-9530 Fax: (919) 435-9538

For Department Use Only:
Application # _____
Permit # _____

Print Legibly or Type Entries

Zoning: \_\_\_\_\_ Flood Hazard: \_\_\_\_\_  
Minimum Setbacks: Front \_\_\_\_\_ Side \_\_\_\_\_ Rear \_\_\_\_\_

General Information

Applicant/General: \_\_\_\_\_ License # \_\_\_\_\_  
Address: \_\_\_\_\_ Phone # \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

Property Owner

Owner: \_\_\_\_\_ Phone # \_\_\_\_\_  
Address: \_\_\_\_\_

Permit Information

Project Address: \_\_\_\_\_  
Subdivision, Lot, Phase: \_\_\_\_\_ Tax PIN# \_\_\_\_\_  
Electric Service Provider: \_\_\_\_\_  
Permit to Do: \_\_\_\_\_  
Description of Work: \_\_\_\_\_

Cost of Construction: \_\_\_\_\_ Project Square Footage: \_\_\_\_\_

COST PER TRADE:

Building \_\_\_\_\_ Electrical \_\_\_\_\_ Plumbing \_\_\_\_\_  
Mechanical \_\_\_\_\_ Sprinkler \_\_\_\_\_ Other \_\_\_\_\_

<i>Contractor</i>	<i>Name</i>	<i>License #</i>	<i>Phone #</i>	<i>Contact Person</i>
Electrical	_____	_____	_____	_____
Mechanical	_____	_____	_____	_____
Plumbing	_____	_____	_____	_____
Fire Alarm	_____	_____	_____	_____
Sprinkler	_____	_____	_____	_____
Other	_____	_____	_____	_____

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

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