



CITY OF ROANOKE RAPIDS

PLANNING & DEVELOPMENT DEPARTMENT

1040 ROANOKE AVENUE, PO Box 38 ROANOKE RAPIDS, NC 27870

PHONE: 252-533-2844 FAX: 252-533-2870

EMAIL: PERMITS@ROANOKERAPIDSNC.COM

PLUMBING PERMIT

Payment Information _____

Contractor: _____ NC State License Number: _____

Address: _____ Telephone: _____ Email Address: _____

Project Information Address: _____ Residential: _____ Commercial: _____

Building Owner: _____ Telephone: _____

Owner's Address: _____ Email Address: _____

Description of Work _____

RESIDENTIAL PROJECTS

ITEM	NO.	FEE (each)	COST	
Full Bath Group (W/C, Lav, Tub/Shower)		\$15.00		
Half Bath Group (W/C and Lav.)		\$10.00		
Kitchen Group (Sink, D/W, Icemaker)		\$15.00		
Garbage Disposal		\$ 6.00		
Ice Maker		\$ 6.00		
Water Heater		\$ 6.00		
Sinks		\$ 6.00		
Lavatories		\$ 6.00		
Bathtubs		\$ 6.00		
Showers		\$ 6.00		
Water Closets		\$ 6.00		
Laundry Tubs		\$ 6.00		
Washing Machine		\$ 6.00		
Spa / Hot Tub		\$ 6.00		
Sump Pump		\$ 6.00		
Pool Pumps		\$ 6.00		
Sewer Connection		\$ 6.00		
Water Connection		\$ 6.00		
Other:		\$ 6.00		
Gas piping		\$ 0.00		
APPLICATION FEE			55	00
TOTAL PERMIT COST				

COMMERCIAL PROJECTS

ITEM	NO.	FEE (each)	COST	
Water Closet		\$ 6.00		
Lavatory		\$ 6.00		
Urinal		\$ 6.00		
Floor Drain		\$ 6.00		
Catch Basin		\$ 6.00		
Sinks		\$ 6.00		
Drinking Fountains		\$ 6.00		
Bathtub		\$ 6.00		
Shower		\$ 6.00		
Water Heater		\$ 6.00		
Laundry Tub		\$ 6.00		
Washing Machine		\$ 6.00		
Dishwasher		\$ 6.00		
Spa / Hot Tubs		\$ 6.00		
Sump Pumps		\$ 6.00		
Pool Pumps		\$ 6.00		
Sewer Connection		\$ 6.00		
Water Connection		\$ 6.00		
Fire Sprinklers		0.05		
Sq. Ft.=		Sq. Ft.		
Other:		\$ 6.00		
Gas piping		\$ 0.00		
APPLICATION FEE			55	00
TOTAL PERMIT COST				

The Undersigned hereby makes application for permit and inspection of work described and agrees to comply with all applicable laws regulating the work. This application only becomes a permit when it has been processed and approved by the City of Roanoke Rapids' Planning and Development Department and all applicable fees are paid. There is a 24- hour notice for inspections unless deemed as an emergency by this office.

CONTRACTOR SIGNATURE DATE

BUILDING INSPECTOR DATE

SEWER _____ SEPTIC _____