

CATAWBA COUNTY PERMIT

BUILDING (C)Addition

P. O. Box 389

25 Government Drive

PERMIT NO:

9973132

Newton, North Carolina 28658

APPLIED: 04/13/2000 ISSUED: 04/13/2000

EXPIRES: 01/01/2999

Phone: 828-465-8399 Newton FAX: 828-465-8962

www.catawbacountync.gov

Applicant DEFAULT APPLICANT, ,

ACCOUNT: 1000

Owner ST JOHNS LUTHERAN CHURCH, PO BOX 575, CONOVER NC 28613

LIEN AGENT NOT ASSIGNED

PROPERTY ID#:375205183565

STREET ADDRESS:2126 ST JOHNS CH RD, CONOVER

PROJECT DESCRIPTION:DS - I40 EAST TO HWY 16N/ GO 2 MILES TO ST JOHNS

LUTHERAN CH RD/ ON RIGHT GO 2 MILES/ CHURCH IS ONÌ
RIGHT PD - ST JOHNS LUTHERAN CHURCH-OWNER/ 6616/

ADDITION TOì

EXISTINGCHURCH (SUNDAY SCHOOL, OFFICES &ì

CONFERENCE ROOM)/ ZONING 30/15/30

DIRECTIONS: ADDITION

TYPE OF USE: TOTAL SQ FT 6,616.00

OF STORIES: 3

ZONING: NUMBER OF UNITS:

CODE EDITION: TOTAL # OF ROOMS: 0

INVOICE#:

FEE DESCRIPTION		DATE	FEE AMOUNT
Permit Fee		04/13/2000	\$608.78
	TOTAL FEES		\$608.78

ISSUED BY: System Administrator APPROVED BY: Reid Goforth

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The County has an agreement with Republic Services of NC granting them an exclusive license to transport and dispose of all solid waste, including construction and demolition debris in the unincorporated areas of the County. The approval of your application for a construction/building permit is made specifically contingent upon your agreement not to utilize any other business or company to transport and/or dispose of solid waste from construction site(s). Failure to comply with this provision may result in assessment of fines up to \$500 per day. Call Republic Services, Hickory at 828-624-2453 for your disposal needs.

This permit is issued on the express condition that the above work shall conform in all respects to the statements certified to in the application for such permit, and that all work shall be done in accordance with all applicable zoning, building, electrical, plumbing and mechanical ordinances of Catawba County and the State of North Carolina.

A permit issued for work under this Code shall expire by limitations six months after the date of issuance if the work authorized (FOOTINGS ARE CONSIDERED 1st INSPECTION ON NEW CONSTRUCTION) has not been commenced. If after commencement the work is discontunued for a period of 12 months, the permit therefore shall expire. If a project expires, a minimum fee per the current fee schedule will be charged for each building and trade permit to reactivate the project.

***AN ADDITIONAL CHARGE PER THE CURRENT FEE SCHEDULE MAY BE ASSESSED FOR EACH UNWARRANTED INSPECTION SCHEDULED. ***

If there are any questions, please contact the office between 8:00a.m. and 5:00p.m.

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AFFIDAVIT OF WORKER'S COMPENSATION COVERAGE AND STATE PRIVILEGE LICENSE REQUIREMENTS

N.C.G.S. 87-14

The undersigned	applicant for Build	ling Permit # being the				
Unlicensed Contractor	Owner	Officer/Agent of the Contractor				
do hereby aver under penalties of perjury th	at the person(s), fir in the permi	m(s) or corporation(s) performing the work set forth				
has/have three(3) or more employees and have	e obtained workers	compensation insurance to cover them.				
has/have one or more subcontractor(s) and have	has/have one or more subcontractor(s) and have obtained worker's compensation insurance covering them.					
	has/have one or more contractor(s) who has/have no employees and has waived and has waived in writing their right to coverage by their contractor or have their own policy or worker's compensation covering themselves					
has/have not more that two (2) employess and	no subcontractors.					
has renewed Contractor License.						
has/have applied for permit where the cost is u requirements specified by G.S. 87-14.	under \$30,000 and	I am therefore exempt from Licensed General Contractor				
		ng requirements mandating occupancy of the premise king on the project for which the permit is sought.				
It is understood that the Inspections Department issuing the per compensation insurance coverage prior to issuance of the per corporation carrying out the work.						
SIGNATURES ARE TO BE WITN	NESSED BY INSPI	ECTIONS PERSONNEL OR NOTARIZED.				
FIRM NAME:						
WITNESS:		DATE:				
BY (PRINT):	TITL	E:				
SIGNATURE:		DATE:				
SWORN TO AND SUBSCRIBED BEFORE ME THIS	DAY OF	, 20				
SIGNATURE OF NOTARY:						
MY COMMISSION EXPIRES	, 20	OFFICIAL SEAL				

11/04/2025 00:25

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Utilities & Engineering Department Small Site Erosion Control Installation and Maintenance Affidavit

This affidavit must be submitted at time of Building Permit application.

Parcel Identification N	umber (PIN): 37520	05183565				
Building Permit Numb	per: 9973132					
Subdivision:						
Phase/Unit:	Lot:	Block:				
Job Site Address: 2120	ST JOHNS CH R	D, CONOVER				
Owner Name: ST JOHNS LUTHERAN CHURCH						
Owner Mailing Address	ss: PO BOX 575, C	ONOVER, NC 28613				
Primary Phone:						
Other Phone:						
Sedimentation Control Ordin will be assessed a Project M	nance. I acknowled; Management Fee of	son responsible for compliance ge that violations of erosion of \$50. I acknowledge that Best my job site which includes, at	control requirements Management Practices			
• Installation and da where water exits th	•	ilt barriers (i.e. silt fences, etc.)	in those low areas			
	•	stone (1 ½ " - 3 ½ " diameter stacking of mud into the street;	tone) driveway			
	=	acent property immediately follo the storm drainage system;	owing any such			
• Conduct no land d etc.(i.e. "blue line w	•	rithin 30 feet of the banks of stro	eams, lakes, wetlands,			
D : : : : : : : : : : : : : : : : : : :	request for any type o	of slab inspection, or any inspec				
within 21 days of la		hever is earlier, temporary vege maintained daily.	tation and/or mulch on			
within 21 days of la	nd disturbance, which		tation and/or mulch on DATE			
within 21 days of latall disturbed areas si	nd disturbance, which					

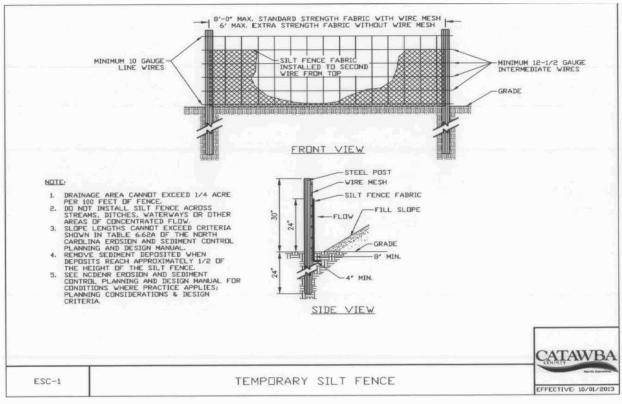
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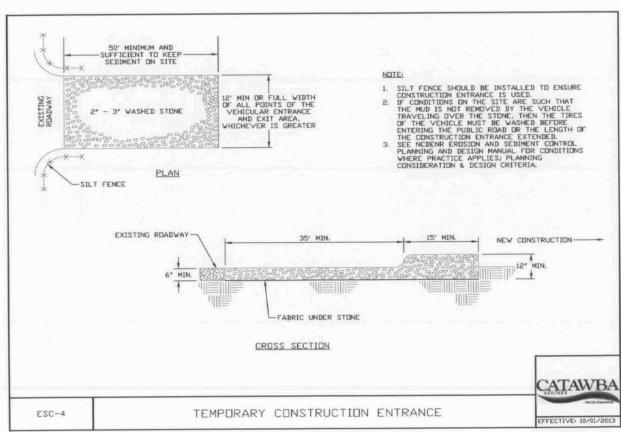
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