

CATAWBA COUNTY PERMIT

BUILDING (C) Alteration

P. O. Box 389 25 Government Drive Newton, North Carolina 28658

PERMIT NO:

EXPIRES:

IVR PIN# BLD2001-00737

APPLIED: 05/14/2001 05/14/2001 ISSUED: 11/14/2001

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

www.catawbacountync.gov

Applicant	DEFAULT APPLICANT, ,	
Owner	ST JOHNS LUTHERAN CHURCH, PO BOX 575, CONOVER NC 28613	
Primary Contractor	*LOOPER & COMPANY, INC., DAVID E.* BILLING ACT*, 320 15TH ST SE, HICKORY NC 28601-	
	B:828-324-1284F:828-324-1289 BBOULDING@DELCOMPANY.COM	
	ACCOUNT: 6490	

LIEN AGENT NOT ASSIGNED

PROPERTY ID#:375205183565

STREET ADDRESS:2126 ST JOHNS CH RD, CONOVER

PROJECT DESCRIPTION: ROCK BARN RD/ LF ST JOHNS CH RD/ 3 MI ON RT *NEED PLANS

ON STAIR TOWER AND BOILER RM & NEW EXTERIOR WALL

PRIOR TO ANY WORK OR INSPECTIONS ON THESE AREAS

DIRECTIONS:INTERIOR UPFIT OF FIRE DAMAGED ADDITION *REF 9973132 FOR INSPECTION NOTES / HEALTH **DEPT / ZONING***

TYPE OF USE: TOTAL SQ FT 0.00

OF STORIES: 0

ZONING: NUMBER OF UNITS:

CODE EDITION: 0 TOTAL # OF ROOMS:

Related Permits for primary subcontractors associated with this project:

Additional permits for other related work will be issued as needed (i.e. gas lines, unit heaters, etc.)

9973132 9973653 9974088 ELE2001-01446 ELE2001-00063 ELE2001-02054

MEC2000-00480 MEC2001-00056 MEC2001-01071

PLM2001-00857 PLM2001-00943

These Permits will remain inactive until an application from the subcontractor is received by the Permit Center.

Once the Permit is activated. scheduling through the IVR system will be permitted.

INVOICE#:

<u>DATE</u>	FEE AMOUNT
05/14/2001	\$1,712.50
05/14/2001	\$30.00
02/28/2002	\$105.00
	\$1,847.50
	05/14/2001 05/14/2001

ISSUED BY: System Administrator APPROVED BY: Reid Goforth

BACO

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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.

Request for an informal internal review per GS153A-352(f) may be requested **Only** if issue cannot be resolved with the inspector of record.

Contact: Building Services Field Supervisor Reid Goforth.

Desk phone: 828-464-7880 Cell phone: 828-312-5709 Email: reid@catawbacountync.gov

11/03/2025 03:30

ISSUED BY: System Administrator
APPROVED BY: Reid Goforth



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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 E	Building Permit # being the
Unlicensed Contractor Own	erOfficer/Agent of the Contractor
do hereby aver under penalties of perjury that the person(s in the p	
has/have three(3) or more employees and have obtained work	xers compensation insurance to cover them.
has/have one or more subcontractor(s) and have obtained wo	rker's compensation insurance covering them.
has/have one or more contractor(s) who has/have no employed coverage by their contractor or have their own policy or work	
has/have not more that two (2) employess and no subcontrac	tors.
has renewed Contractor License.	
has/have applied for permit where the cost is under \$30,000 are requirements specified by G.S. 87-14.	and I am therefore exempt from Licensed General Contractor
has/have applied for permit under owner exception to the lice for 12 months following the completion of the project, while	
It is understood that the Inspections Department issuing the permit may req compensation insurance coverage prior to issuance of the permit and at any corporation carrying out the work.	
SIGNATURES ARE TO BE WITNESSED BY IN	SPECTIONS PERSONNEL OR NOTARIZED.
FIRM NAME:	
WITNESS:	DATE:
BY (PRINT):	ITLE:
SIGNATURE:	DATE:
SWORN TO AND SUBSCRIBED BEFORE ME THIS DAY O	F , 20
SIGNATURE OF NOTARY:	
MY COMMISSION EXPIRES , 20	OFFICIAL SEAL

WEB PRINTED COPY

11/03/2025 03:30

ISSUED BY: System Administrator APPROVED BY: Reid Goforth