

CATAWBA COUNTY PERMIT

BUILDING (C) Demolition

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

PERMIT NO:

IVR PIN# BLD2009-00146

APPLIED: 02/03/2009 ISSUED:

02/03/2009 08/03/2009 **EXPIRES**:

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

www.catawbacountync.gov

Applicant	DEFAULT APPLICANT, , ACCOUNT: 1000			
Owner	CATAWBA COUNTY BOARD OF EDUCATION, PO BOX 1010, NEWTON NC 28658-1010			
Contractor	*GRIFFIN WRECKING CO, INC., D.H., 8880 DEITZ AV, HICKORY NC 28602 B:828-397-7570C:8283977577F:828-397-6540 NPERKINS@DHGRIFFIN.COM			
Contractor	CATAWBA COUNTY SCHOOLS (GEN) BILLING, PO BOX 1010, NEWTON NC 28658- B:8284643562F:828-465-4442 ROBERT HOYL@CATAWBASCHOOLS.NET			

LIEN AGENT NOT ASSIGNED

PROPERTY ID#:372309160508

STREET ADDRESS:2415 SPRINGS RD NE, HICKORY NC

PROJECT DESCRIPTION: DEMOLITION OF OLD SCHOOL BUILDING (THE OLD ST STEPHENS ELEM SCHOOL)

DIRECTIONS: SPRINGS RD NE / OLD ST STEPHENS ELE. SCHOOL

0.00 TYPE OF USE: TOTAL SQ FT

OF STORIES: 0

ZONING: NUMBER OF UNITS:

TOTAL # OF ROOMS: 0 CODE EDITION:

INVOICE#:

02/03/2009	\$150.00
02/03/2009	\$5.00
	\$155.00

07/06/2025 17:44

ISSUED BY: Ronda Branham 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.

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

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

N.C.G.S. 87-14

	The undersigned ap	pplicant for Buildi	ng Permit # being the		
	Unlicensed Contractor	Owner	Officer/Agent of the Contractor		
do hereby avo	er under penalties of perjury that	the person(s), firm in the permit	n(s) or corporation(s) performing the work set forth:	h	
has/have three(3) or more employees and have of	obtained workers o	compensation insurance to cover them.		
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 mo	ore that two (2) employess and n	o subcontractors.			
has renewed Co	entractor License.				
	d for permit where the cost is un secified by G.S. 87-14.	der \$30,000 and I	am therefore exempt from Licensed General Contr	ractor	
* *			g requirements mandating occupancy of the premisting on the project for which the permit is sought.	se	
	rage prior to issuance of the perm		certificates of coverage and/or waivers of worker during the permitted work for any person, firm or		
SIGN	NATURES ARE TO BE WITNE	ESSED BY INSPE	CTIONS PERSONNEL OR NOTARIZED.		
FIRM NAME:					
WITNESS:			DATE:		
BY (PRINT):		TITLE	: :		
SIGNATURE:			DATE:		
	RIBED BEFORE ME THIS	DAY OF	, 20		
			,		
SIGNATURE OF NOTAR	Y:		_		
MY COMMISSION EXPI	RES	. 20	OFFICIAL SE	741	

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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 Nu	mber (PIN): 37230916050 8	8					
Building Permit Numbe	r: BLD2009-00146						
Subdivision:							
Phase/Unit:	Lot: Block:	:					
Job Site Address: 2415 SPRINGS RD NE, HICKORY NC							
Owner Name: CATAW	BA COUNTY BOARD O	OF EDUCATION					
Owner Mailing Address: PO BOX 1010, NEWTON, NC 28658-1010							
Primary Phone:							
Other Phone:							
Sedimentation Control Ordina will be assessed a Project Ma	ance. I acknowledge that wanagement Fee of \$50. I a	onsible for compliance with the Soil Erosion and violations of erosion control requirements acknowledge that Best Management Practices site which includes, at a minimum, all of the					
· · · · · · · · · · · · · · · · · · ·	• Installation and daily maintenance of silt barriers (i.e. silt fences, etc.) in those low areas where water exits the job site;						
•	y maintenance of a stone (1 to minimize the tracking of	½" - 3½" diameter stone) driveway mud into the street;					
	m the street or adjacent propashing the mud into the store	perty immediately following any such m drainage system;					
• Conduct no land dis etc.(i.e. "blue line wat		feet of the banks of streams, lakes, wetlands,					
within 21 days of land		spection, or any inspection thereafter, or earlier, temporary vegetation and/or mulch on ed daily.					
SIGNATURE		DATE					
PRINTED NAME		TITLE					

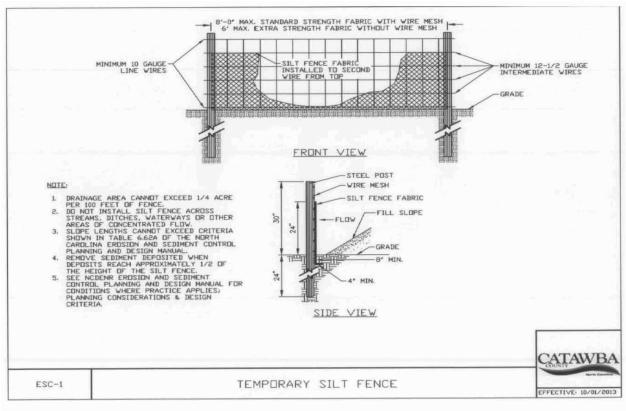
ISSUED BY: Ronda Branham

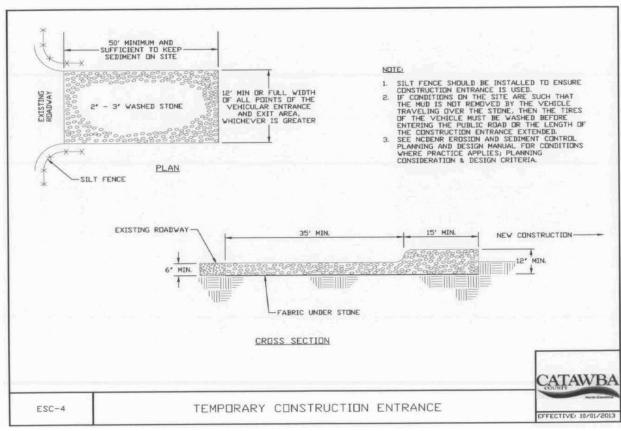
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