

Permit Application  
**TEMPORARY TRAILER**



Permit # \_\_\_\_\_ - \_\_\_\_\_

File Close Date: \_\_\_\_\_

Town of Apex  
Inspection Division  
Phone 919-249-3418 Fax 919-249-3407

Application Date \_\_\_\_\_

Applicant Name \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

**Project Address** \_\_\_\_\_ **Suite** \_\_\_\_\_ **Apex, NC** ZIP \_\_\_\_\_

Subdivision or Project Name \_\_\_\_\_ Lot Number \_\_\_\_\_

Project Contact Person \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

Property Owner \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

**Use of Trailer**

Construction  Sales  Other \_\_\_\_\_ Type of Business \_\_\_\_\_

**Planning Department Approval**

Provide two plot plans signed by the Planning Dept with this application Date Permit Expires: \_\_\_\_\_

Zoning Approval Type:  Construction Dwgs  Certificate of Zoning Compliance  Administrative Approval  Plot Plan

**Utilities**

Water  Apex°  Private  3/4" Water Meter Requested  
Sewer  Public  Private  Temporary Electrical Power Requested  No Temporary Board  
Electric  Apex°  Progress °First time customers MUST apply with the Apex Finance Dept. for service  
 Well and/or Septic Permit, Provide Wake Co. Permit Number(s) \_\_\_\_\_

**Applicant Statement**

I hereby certify that I have the authority to make the necessary application; that all information in this application is correct and all work will comply with the State Building Code and all other applicable State and local laws and ordinances and regulations or private building restrictions, if any, which may be imposed by deed. The Inspection Department will be notified of any changes in the approved plans and specifications for the project herein.

Applicant's Name (print) \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**General Construction or Setup**

Contractor Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

License Number \_\_\_\_\_ Classification:  Residential  Building  Limited  Intermediate  Unlimited

Construction Cost \$ \_\_\_\_\_ Note: A Setup Permit is not required for a Construction Trailer

**Electrical Permit**

Contractor Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

License Number \_\_\_\_\_ Classification:  Limited  Intermediate  Unlimited  Owner  Other

Electrical Cost \$ \_\_\_\_\_

**Plumbing Permit**

Contractor Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

License Number \_\_\_\_\_ Classification:  Class I  Class II  Owner  N/A