

# TOWN OF GREEN LEVEL

## PERMIT OR INSPECTION REQUEST FORM

PLEASE PRINT NEATLY Fill out all required fields and provide as much detail as possible

### SECTION 1 Property address for the permit or Inspection *(Required)*

PLEASE INCLUDE CORRECT HOUSE NUMBER TO EXPEDITE PROCESS.

Property Address: \_\_\_\_\_ Date: \_\_\_\_\_

Premises type (Please check the appropriate box)  Residential  Commercial  Industrial  Other: \_\_\_\_\_

### SECTION 2 Requestors Information *(Required)*

\_\_\_\_\_  
First Name                      Last Name                      Phone number(s)

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Street Address (Please include your house number)                      Town, State, Zip

### SECTION 3 Permit or Inspection for: (Check as many as known)

PLEASE CHECK OFF ANY OF THE FOLLOWING WHICH APPLY, OR DESCRIBE IN FULL AT OTHER.

- |  |  |
|--|--|
| <input type="checkbox"/> Fence Installation            | <input type="checkbox"/> Water and Sewer Hook-Up |
| <input type="checkbox"/> Room Addition                 | <input type="checkbox"/> Move In Inspection      |
| <input type="checkbox"/> Deck Installation             | <input type="checkbox"/> Mobile Home Move-In     |
| <input type="checkbox"/> Carport / Garage Installation |  |
| <input type="checkbox"/> Accessory Building            |  |
| <input type="checkbox"/> Driveway Expansion            |  |

Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### SECTION 4 DETAILS

Date of Inspection: \_\_\_\_\_

Time of Inspection: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FOR OFFICE USE ONLY**

Date received: \_\_\_\_\_

Received by: \_\_\_\_\_

**COMPLETED FORMS MUST BE SUBMITTED TO THE TOWN OF GREEN LEVEL**

*Green Level Town Hall  
2510 Green Level Church Road  
P.O. Box 974  
Haw River, NC 27258  
Phone: 336-578-3443 Fax: 336-578-5373  
[town-email@greenlevelnc.com](mailto:town-email@greenlevelnc.com)*