CITY OF GOLDSBORO

HANDICAP RAMP PERMIT APPLICATION

APPLICATION #_____

DATE:	PERMIT NO:
CONTRACTOR'S NAME	<u>:</u>
CONTRACTOR'S ADDRI	ESS:
PROPERTY OWNER:	
PROJECT ADDRESS:	
COST OF PROJECT:	
*A \$50 Plan Review Fee ap	oplies
application for permit and i	p permit is \$75.00. The undersigned hereby makes nspection of all work and agrees to comply with all building applicable to the building of a handicap ramp.
Note: It is the contractor work.	's responsibility to call for inspections at proper stages of
	s with a drawing showing where the ramp will be located ding and the distance from all property lines.
Phone #:	
	Signature
	Planning and Zoning Approval