



**ROBESON COUNTY BUILDING AND SAFETY
CODE ENFORCEMENT
435 Caton Road • Suite 300
Lumberton, NC 28360**

INSULATION PERMIT APPLICATION

OWNER: _____
ADDRESS: _____
(LOCATION OF PROPOSED WORK)
CONTRACTOR: _____
LICENSE #: _____ CONTACT#: _____
TYPE OR USE: RESIDENTIAL _____ COMMERCIAL _____

FEE'S

Application Fee\$50.00
Technology Fee\$5.00
Total Number of Square Feet _____ (minus 1000 sq. ft.) X .03 = _____
Total Fee To Be Paid..... _____

Requests for inspections can be made by contacting the Department between 8:15 am until 5:15 pm Monday thru Friday. Please note that inspections will not be conducted the same day of the request.

I hereby certify that all information in the application is correct and all work will comply with the NC State Energy Code and all other applicable State and local laws, ordinance and regulations. I will notify the Building Safety Department in the event there are any changes in the approved plans of this project.

Owner/Contractor Signature

Date of Application