

FIRST TIME HOME BUYERS PERMIT APPLICATION CHECKLIST

Received by: (office use)

Date (office use)

Applicant must fill out checklist and attach to plans before submitting for review
Please check the appropriate box to indicate items being submitted

Map Parcel Numbers from Real Estate Tax Receipt

Recorded Deed to property

County Road _____ New Entrance Required? () Yes () No

Affidavit from owner if deed is not recorded in applicant/proposed owner's name

Property located in a designated flood hazard area () Yes () No *(If yes, a flood development permit application may need to be submitted for approval)*

Electric On

Water On

Gas On

Will be on at time of Inspection

House will be unlocked day of Inspection

All Pets must be secured or removed at time of inspection

It may be necessary to move furniture or wall hangings to inspect
Electrical, Mechanical, Plumbing and Interior Walls.

Signature: _____

Date: _____