

MACON COUNTY Generator APPLICATION
INFORMATION IS REQUIRED BEFORE A PERMIT CAN BE ISSUED

Parcel # _____

Owners Name: _____ Phone #: _____

Owners Address: _____

Job Address: _____

Directions to Job Site including gate code if applicable: _____

* Electrician: _____

License #: _____ Phone #: _____ Cell #: _____

*Gas Company: _____

License #: _____ Phone#: _____ Cell #: _____

*Company or Person Running Gas Lines: _____

License #: _____ Phone#: _____ Cell #: _____

IF PERMIT IS GRANTED, I AGREE TO COMFORM TO THE NORTH CAROLINA STATE BUILDING CODE AND TO ALL COUNTY ORDINANCES AND THE LAWS OF THE STATE OF NORTH CAROLINA REGULATING SUCH WORK

Signature of Applicant: _____ Date: _____

Effective 5/24/2010 replacement to all previous applications