



CURRITUCK COUNTY PROJECT MODIFICATION

This form must be completed for all projects whenever you wish to change the scope of work as described on the original permit application.

PROJECT INFORMATION

Project Address _____ City _____ ZIP _____
 Subdivision _____ Lot No. _____
 Project Name _____
 Project Contact Person _____ Phone _____ Email _____

PROPOSED MODIFICATION

(Check one and submit revised plan showing the revisions with this form)

- Revision to the approved site plan Revision to the approved building plans
 Revision to a plan in review Other _____

What is the modification?

This modification includes changes that pertain to (check all that apply):

- Building Electrical Plumbing Mechanical Zoning/Setbacks Storm Water Septic (Health Dept.) Fire

Submit new signed trade affidavit when changing trade subcontractor with this form

Does the modification result in a change in square footage? No Yes (If yes, _____ more _____ less)

Does the modification result in a change in estimated cost? No Yes (If yes, _____ more _____ less)

ADDITIONAL PERMITS REQUIRED

Does the modification require any additional permits? No Yes

If yes, what new permits are required? Building Electrical Plumbing Mechanical Other _____

ADDITIONAL CONTRACTORS

Contractor Type _____
 Contractor (Company Name) _____ Office Phone _____
 Address _____ City _____ State _____ ZIP _____
 Email _____ Office Fax _____
 NC License Number _____ Class _____

Contractor Type _____
 Contractor (Company Name) _____ Office Phone _____
 Address _____ City _____ State _____ ZIP _____
 Email _____ Office Fax _____
 NC License Number _____ Class _____

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 Contractor (Company Name) _____ Office Phone _____
 Address _____ City _____ State _____ ZIP _____
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 NC License Number _____ Class _____

OWNER / AGENT STATEMENT

I hereby certify that I have the authority to make the above change(s) to the original application and that the information provided is correct.

Owner/Agent Name (print)

Owner/Agent Signature)

Date