



# BUILDING RESIDENTIAL

910-893-7525

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PERMIT NUMBER

**BRES2511-0025**

|                                                       |                                                    |                                    |
|-------------------------------------------------------|----------------------------------------------------|------------------------------------|
| <b>JOB ADDRESS:</b> 63 THOMAS GAGE DR                 | <b>PERMIT SUBTYPE:</b> COVERED PORCH OR DECK       | <b>PARCEL NO:</b> 0642-94-8971.000 |
| <b>DESCRIPTION:</b> 20x14 covered porch roof addition | <b>DATE ISSUED:</b> 11/19/2025                     | <b>DATE EXPIRED:</b>               |
| <b>PLAN NAME:</b>                                     | <b>ZONING DISTRICT:</b> RA-40 - 0.5 acres (100.0%) |                                    |

|                                                                                                                     |                                |
|---------------------------------------------------------------------------------------------------------------------|--------------------------------|
| <b>APPLICANT:</b> MARTIN JAYLON JT W/ROS<br>63 THOMAS GAGE DR FUQUAY VARINA, NC 27526 FUQUAY VARINA, NC 27526-4050  | <b>PHONE:</b><br><b>EMAIL:</b> |
| <b>CONTRACTOR:</b> MARTIN JAYLON JT W/ROS<br>63 THOMAS GAGE DR FUQUAY VARINA, NC 27526 FUQUAY VARINA, NC 27526-4050 | <b>PHONE:</b><br><b>EMAIL:</b> |
| <b>OWNER:</b> MARTIN JAYLON JT W/ROS<br>63 THOMAS GAGE DR FUQUAY VARINA, NC 27526 FUQUAY VARINA, NC 27526-4050      | <b>PHONE:</b><br><b>EMAIL:</b> |

| REQUIRED INSPECTIONS        |          |      |          |
|-----------------------------|----------|------|----------|
| INSPECTION TYPE             | APPROVAL | DATE | COMMENTS |
| FINAL**                     |          |      |          |
| FOOTING                     |          |      |          |
| OPEN FLOOR                  |          |      |          |
| ROUGH IN                    |          |      |          |
| SETBACK VERIFICATION SURVEY |          |      |          |