

Director: Jacob Patrick



WILKES COUNTY
INSPECTIONS DEPARTMENT
CONTRACTOR VERIFICATION FORM

Wilkes County
Inspections Department
110 North Street
Wilkesboro, NC 28697
336.651.7303
336.651.7567 (fax)

JOB NAME _____

BUILDING PERMIT # _____

I AM RESPONSIBLE FOR THE BUILDING _____, SETUP _____, ELECTRICAL _____, PLUMBING _____, AND/OR MECHANICAL _____ WORK TO BE DONE ON THIS JOB.

Contractor Business Name

License Number

Contractor's Signature

Date

Contractor's Printed Name

Phone Number

Email Address

Witness (Office Use Only)

Date