

## **ADMINISTRATIVE**

FISCAL YEAR 2021 - 2022

Black & White copy		\$	0.25	per page
Black & White copy, mailed			1.00	per page
Copy of plat				
18 x 24		\$	1.00	per page
24 x 36		\$	2.00	per page
Returned check, each check, each time pres	sented for payment	\$	25.00	
Employee Badge Replacement		\$	10.00	
James W. Warren Citizens Center Auditori	um Rental :			
Sponsored by Lincoln County Board	of Commissioners			
Basic 4 Ho	ours of Usage	\$	100.00	
Basic 8 Ho	ours of Usage	\$	200.00	
Basic 24 H	ours of Usage	\$	400.00	
Rate per hour over requ	est	\$	15.00	
Non-Sponsored by Lincoln County I	Board of Commissioners			
Monday - Thursday				
Admission				
	Basic 4 Hours of Usage	\$	400.00	
	Basic 8 Hours of Usage	\$	500.00	
	Basic 24 Hours of Usage	\$	700.00	
No Admiss	sion			
	Basic 4 Hours of Usage	\$	150.00	
	Basic 8 Hours of Usage	\$	250.00	
	Basic 24 Hours of Usage	\$	450.00	
Friday - Sunday				
Admission				
	Basic 4 Hours of Usage	\$	800.00	
	Basic 8 Hours of Usage	\$	900.00	
	Basic 24 Hours of Usage	\$	1,100.00	
No Admiss	sion			
	Basic 4 Hours of Usage	\$	350.00	
Basic 8 Hours of Usage		\$	450.00	
	Basic 24 Hours of Usage	\$	650.00	
Rate per hour over requ	est	\$	50.00	
**Note - 25% discount for consecuti	ve davs with most expensive day	v being f	irst dav.	

\*\*Note - 25% discount for consecutive days with most expensive day being first day.

# Administrative Page 2 of 2

Set-Up/Tear Down	\$ 250.00
Reserved/Blocked Parking	\$ 3.00 per space
Commercial Kitchen	\$ 50.00
Janitorial Staff	\$ 15.00 per hour
Piano, Grand (fee waived if renter tunes for event)	\$ 200.00
Piano, Upright (fee waived if renter tunes for event)	\$ 50.00
Deposit for use of computer, interactive podium, audio player, stage monitor, wired microphone, wireless microphone, lapel microphone, audio cables	\$ 250.00
Late Fee - If contract is signed within 14 days of event	\$ 100.00



## **ANIMAL SERVICES**

FISCAL YEAR 2021 - 2022

Animal Shelter		
Cat Adoption	\$	20.00
Dog Adoption	\$	80.00
Pocket Pet Adoption	\$	10.00
Livestock Adoption (after auction)	\$	20.00
Senior Citizen/Armed Forces Cat Adoption	\$	-
Senior Citizen/Armed Forces Dog Adoption	\$	-
Multiple Cat Adoption	\$	10.00
Fee Waived Adoption Event Adoption	\$	-
Adoption Special Adoption	Va	ariable Fees
Rescue Pull	\$	-
Altered Animal Reclaim		
1st Offense	\$	-
2nd Offense	\$	25.00
3rd Offense	\$	50.00
Unaltered Animal Reclaim		
1st Offense	\$	25.00
2nd Offense	\$	50.00
3rd Offense	\$	100.00
Shelter Bite Quarantine Fee	\$	50.00
Daily Board Fee	\$	10.00
Rabies Vaccination Fee	\$	7.00
Trap Rental Fee	\$	40.00
Animal Control		
Warning Violation	\$	_
1st Offense Civil Citation	\$	100.00
2nd Offense Civil Citation (repeat violation)	\$	200.00
3rd Offense Civil Citation (repeat violation)	\$	300.00
4th Offense Civil Citation (repeat violation)	\$	400.00
5th + Offense Civil Citation (repeat violation)	\$	500.00
Field Return to Owner	\$	_
Exotic License (per household)	\$	250.00
*		

Fees may be waived or reduced by the Animal Services Director or designee at his or her discretion, as allowed by law.



## **ENVIRONMENTAL HEALTH**

Septic Permit Fees (On-site Wastewater Program)		
Improvement Permit (includes soil/site evaluation and proposed		
system area)	\$	200.00
Authorization to Construct (includes visit, site verification and		
operational permit)	\$	300.00
Engineered Option Permit	\$	105.00
Operational Permit	\$	50.00
Re-inspection Fees for Certain Septic Systems .1961 Rule (in addition to Operatio	nal :	Permit)
Type IIIB	\$	50.00
Type IV	\$	75.00
Type V	\$	100.00
Type VI	\$	150.00
Use of Existing System/Compliance Fee	\$	150.00
	ът	Charge
Repairs (malfunctions)	No	Charge
Well Permit Fees (Well Program)	No	Charge
Well Permit Fees (Well Program)	No	Charge
Well Permit Fees (Well Program) New/Replacement Wells (includes initial well siting visit, grouting	\$	350.00
Well Permit Fees (Well Program)  New/Replacement Wells (includes initial well siting visit, grouting inspection, well head completion inspection)		C
Well Permit Fees (Well Program)  New/Replacement Wells (includes initial well siting visit, grouting inspection, well head completion inspection)  Existing Well Repair (excludes Pump Replacement)	\$	350.00
Well Permit Fees (Well Program)  New/Replacement Wells (includes initial well siting visit, grouting inspection, well head completion inspection)	\$ \$ \$	350.00 175.00
Well Permit Fees (Well Program)  New/Replacement Wells (includes initial well siting visit, grouting inspection, well head completion inspection)  Existing Well Repair (excludes Pump Replacement)  State Required Water Sample (17 parameters)  Abandonment Verification Visit	\$ \$ \$	350.00 175.00 200.00
Well Permit Fees (Well Program)  New/Replacement Wells (includes initial well siting visit, grouting inspection, well head completion inspection)  Existing Well Repair (excludes Pump Replacement)  State Required Water Sample (17 parameters)  Abandonment Verification Visit  Water Samples - Private Water Supply Fees	\$ \$ \$ No	350.00 175.00 200.00 Charge
Well Permit Fees (Well Program)  New/Replacement Wells (includes initial well siting visit, grouting inspection, well head completion inspection)  Existing Well Repair (excludes Pump Replacement)  State Required Water Sample (17 parameters)  Abandonment Verification Visit  Water Samples - Private Water Supply Fees  (Customer must request these samples, they are not part of the required sampling in well programs)	\$ \$ No	350.00 175.00 200.00 Charge
Well Permit Fees (Well Program)  New/Replacement Wells (includes initial well siting visit, grouting inspection, well head completion inspection)  Existing Well Repair (excludes Pump Replacement)  State Required Water Sample (17 parameters)  Abandonment Verification Visit  Water Samples - Private Water Supply Fees  (Customer must request these samples, they are not part of the required sampling in well probacteriological Samples (e-Coli and mortgage)	\$ \$ \$ No	350.00 175.00 200.00 Charge
Well Permit Fees (Well Program)  New/Replacement Wells (includes initial well siting visit, grouting inspection, well head completion inspection)  Existing Well Repair (excludes Pump Replacement)  State Required Water Sample (17 parameters)  Abandonment Verification Visit  Water Samples - Private Water Supply Fees  (Customer must request these samples, they are not part of the required sampling in well probacteriological Samples (e-Coli and mortgage)  Inorganic Chemical Sample	\$ \$ No	350.00 175.00 200.00 Charge
Well Permit Fees (Well Program)  New/Replacement Wells (includes initial well siting visit, grouting inspection, well head completion inspection)  Existing Well Repair (excludes Pump Replacement)  State Required Water Sample (17 parameters)  Abandonment Verification Visit  Water Samples - Private Water Supply Fees  (Customer must request these samples, they are not part of the required sampling in well probacteriological Samples (e-Coli and mortgage)	\$ \$ Noogra \$	350.00 175.00 200.00 Charge
Well Permit Fees (Well Program)  New/Replacement Wells (includes initial well siting visit, grouting inspection, well head completion inspection)  Existing Well Repair (excludes Pump Replacement)  State Required Water Sample (17 parameters)  Abandonment Verification Visit  Water Samples - Private Water Supply Fees (Customer must request these samples, they are not part of the required sampling in well propared by the samples (e-Coli and mortgage)  Inorganic Chemical Sample  Regular Parameters	\$ \$ No ogra \$	350.00 175.00 200.00 Charge m) 25.00
Well Permit Fees (Well Program)  New/Replacement Wells (includes initial well siting visit, grouting inspection, well head completion inspection)  Existing Well Repair (excludes Pump Replacement)  State Required Water Sample (17 parameters)  Abandonment Verification Visit  Water Samples - Private Water Supply Fees  (Customer must request these samples, they are not part of the required sampling in well probacteriological Samples (e-Coli and mortgage)  Inorganic Chemical Sample  Regular Parameters  Nitrate/Nitrite	\$ \$ Noogra \$	350.00 175.00 200.00 Charge m) 25.00 73.00 36.00
Well Permit Fees (Well Program)  New/Replacement Wells (includes initial well siting visit, grouting inspection, well head completion inspection)  Existing Well Repair (excludes Pump Replacement)  State Required Water Sample (17 parameters)  Abandonment Verification Visit  Water Samples - Private Water Supply Fees (Customer must request these samples, they are not part of the required sampling in well programic Chemical Samples (e-Coli and mortgage)  Inorganic Chemical Sample  Regular Parameters  Nitrate/Nitrite  Sulfate-Reducing/Sulfur Bacteria	\$ \$ No ogra \$ \$	350.00 175.00 200.00 Charge m) 25.00 73.00 36.00 50.00

Swimming Pool Fees		
Public Seasonal Pools (includes permit and one inspection)	\$ 150.00	per season
(Operating on or after April 1 and closing on or before October 31)		
Public Annual Pools (includes permit and two inspections)	\$ 250.00	per year
Private Pool Testing (by request only)	\$ 100.00	
Plan Review	\$ 250.00	
Food Establishment Plan Review Fees		
(Excludes prototype franchises, chain facilities & nonprofit organizations)		
Restaurant Full-Service Plan Review	\$ 250.00	
Food Stand/Meat Market/Push Cart/MFU		
Plan Review	\$ 200.00	
Temporary Food Events/Limited Food Stand Permit	\$ 75.00	
Renovation/Upgrade Plan Review	\$ 75.00	
Other Fees		
Revisit Fee	\$ 75.00	
Tattoo Parlor Annual Fee	\$ 275.00	per artist



## FIRE MARSHAL

FISCAL YEAR 2021 - 2022

## Required Operational Permits (mandatory permits required by NC Fire Code)

ABC Permit	\$	100.00	
Amusement Buildings (105.6.2)	\$	100.00	
Aviation Facilities-Group H or S, servicing or repair, and aircraft			
refueling-servicing vehicles (105.6.3)	\$	100.00	
Burning Permit (105.6.30)			
Open burning permit required for the following:			
Residential and Farms (must obtain from NC Forest Service)	N	o Charge	
Burning for Fire Department Training (must obtain paperwork			
before training event)	N	o Charge	
Bonfire (recreational fires are not required to have a permit)	\$	25.00	
Land Clearing for Commercial, Industrial or Residential			
Construction Residential	\$	25.00	per lot
Commercial or Industrial	\$	300.00	per site
Carnivals, Circuses, and Fairs (105.6.4) Permit and site inspection	\$	100.00	
Combustible Dust-Producing Operations (105.6.6)	\$	100.00	
Covered Mall Buildings (105.6.9)	\$	150.00	
Exhibits and Trade Shows (105.6.13)	\$	50.00	
Explosive Storage-manufacture, storage, handling, sale or use (105.6.14)			
Blasting Permit: 48 hours-Permit and site inspection	\$	100.00	
Blasting Permit: 90 days-Permit and site inspection	\$	250.00	
Year-round manufacture, store, sale-Permit and site inspection	\$	500.00	
Fireworks Display (105.6.14) Permit and site inspection			
Indoor	\$	500.00	
Outdoor	\$	250.00	
Pyrotechnic Special Effects Materials	\$	100.00	
Fireworks for sale under a tent			
7 day permit	\$	150.00	
14 day permit	\$	250.00	
30 day permit	\$	450.00	
Flammable and Combustible Liquids (106.6.16, sections 6 thru 11)			
6. Facilities where flammable and combustible liquids are			
produced, processed, transported, stored, dispensed or used	\$	50.00	
7. To take or place temporarily out of service, underground or			
above-ground flammable/combustible storage tank	\$	50.00	
8. To change type of contents stored in flammable/combustible			
tank to a material that poses a greater hazard	\$	50.00	

9. To manufacture, process, blend, or refine flammable or			
combustible materials	\$	50.00	
10. To engage in the dispensing of liquid fuels into tanks of motor			
vehicles at commercial, industrial, governmental, or manufacturing			
establishments	\$	50.00	
11. To utilize a site for dispensing of liquid fuels from tank vehicles			
into fuel tanks of motor vehicles, marina and other equipment at			
commercial, industrial, governmental or manufacturing			
establishments	\$	50.00	
Fumigation and Thermal Insecticidal Fogging (105.6.19)			
Permit and site inspection	\$	100.00	
Hazardous Materials (105.6.20) Permit and site inspection	\$	150.00	
Hazardous Production Materials Facilities (105.6.21)			
Permit and site inspection	\$	150.00	
High-Piled or High-Rack Storage (105.6.22)			
Permit and site inspection	\$	150.00	
Liquid or Gas Fueled Vehicles or Equipment in Assembly Buildings (105.6.26)			
Permit and site inspection	\$	100.00	
Open Flames and Candles (105.6.31)			
Assembly areas, dining areas of restaurants, or drinking			
establishments (churches exempt)	\$	50.00	
Organic Coatings (105.6.33) Permit and site inspection	\$	100.00	
Places of Assembly (churches exempt) (105.6.34)	\$	100.00	
Pyroxylin Plastic (105.6.36) Permit and site inspection	\$	100.00	
Spraying and Dipping Operations (105.6.41) Permit and site inspection	\$	100.00	
Storage of Scrap Tires or Byproducts (105.6.42) Permit and site inspection	\$	100.00	
Temporary Membrane/Air Structures, Kiosks, or Tents-Each (105.6.43) (No charge when used for funeral)	\$	50.00	
Tire Rebuilding Plants (105.6.44)	\$	100.00	
Waste Handling-wrecking yards, junk yards, waste material handling	Ψ	100.00	
facilities (105.6.45)	\$	100.00	
Under/Above Ground Storage Tank-installation, upgrade, removal (105.7.7)	\$		per tank
Onder/1607e Ground Storage Funk instantation, applicate, removal (105.7.7)	Ψ	100.00	per turn
Required Construction Permits (mandatory permits required by NC Fire Code for install	lation	ıs.	
modifications, alterations)		-5,	
Automatic Fire-Extinguishing Systems (105.7.1)	\$	100.00	
Battery Systems-installation of stationary storage battery systems liquid			
capacity greater than 50 gal (105.7.2)	\$	100.00	
Compressed Gases-exceeding amounts in table 105.6.8 (105.7.3)	\$	100.00	
Permit required to install, repair, abandon, remove, place			
temporarily out of service, close, or substantially modify system.			
Cryogenic Fluids (105.7.4)	\$	100.00	
Fire Alarm and Detection Systems, Related Equipment (105.7.5)	\$	100.00	

50.00

Fire Pumps, Related Equipment (105.7.6)	\$ 100.00
Flammable and Combustible Liquids-install, construct, alter (105.7.7)	\$ 100.00
Hazardous Materials (105.7.8)	\$ 100.00
Permit required to install, repair, abandon, remove, place	
temporarily out of service, close, or substantially modify faculty or	
area regulated by Chapter 27.	
Industrial Ovens (105.7.9)	\$ 100.00
LP Gas Systems as required by NC Dept of Agriculture & Consumer	
Services (105.7.10)	\$ 100.00
Private Hydrants (105.7.11)	\$ 50.00
Spraying and Dipping Operations (105.7.12)	\$ 100.00
Standpipe Systems (105.7.13)	\$ 100.00
Temporary Membrane/Air Structures, Kiosks or Tents-Each (105.7.14)	\$ 50.00
Tents and Membrane Structures exceeding 400 sq ft	
Canopy Structures exceeding 700 sq ft (open sides)	
Clusters of Small Canopy Tents exceeding 700 sq ft without separation	
(No charge for funeral tents when used for a funeral)	

The following are exempt from operational fees, but the agency must still get the needed operational permits: churches, schools, County operations and buildings, City operations and buildings, Emergency Service Organizations (Fire, Rescue, EMS), City, County, State, and Federal Law Enforcement Agencies, City, County, State, and Federal Correction Facilities/Detention Centers/Jails, and 501c3 agencies.

No one is exempt from construction permit fees or special use permits, except as defined in the North Carolina Fire Prevention Code.

Operational permits are valid until the next inspection cycle as stated in the North Carolina Fire Prevention Code. Operational permits will be renewed if they meet the requirements.

Additional Departmental Fees (Plan review cost is calculated on square footage, in addition to any permits)

Hydrant Test, other than Flow Test

Amusement Structure Plan Review, Inspection and Permit, includes	
Haunted Houses and Trails (Permit and Plan Review Cost)	\$ 75.00
Commercial Fire Alarm System Plan Review and Inspection, Performance	
Testing (permit plus plan review cost)	
Fire Pump System Plan Review, Inspection, Performance Testing (New,	
Retrofit, Existing) (permit plus plan review cost)	
Fuel Pump Dispenser Inspection and Permit, incl nozzle replacement	
(permit plus plan review cost)	
Kitchen Hood System Plan Review, Inspection, Performance Testing	
(permit plus plan review cost)	

Hydrant Flow Test-per hydrant	\$	50.00
Other Fire Protection System Plan Review, Inspection, Performance		
Testing (New, Retrofit, Existing)	\$	100.00
Spray Booth System Plan Review, Inspection, Performance Testing		
(permit plus plan review cost)		
Special Inspection-outside normal business hours (per hour)	\$	100.00
Sprinkler System Plan Review, Inspection, Performance Testing		
(New, Retrofit, Existing) (permit plus plan review cost)		
Standpipe System Review, Inspection, Performance Testing		
(New, Retrofit, Existing) (permit plus plan review cost)		
Trip Fee for Permit Inspections-site not ready	\$	100.00
Preliminary Plan Review Cost (per building)		
Up to 5,000 sq ft	\$	25.00
5,001 to 10,000 sq ft	\$	50.00
10,001 to 25,000 sq ft	\$	125.00
25,001 to 100,000 sq ft	\$	250.00
Over 100,000 sq ft	\$	500.00
Any individual or contractor that begins work on a project prior to obtaining the permits will be subject to a civil citation and double permit fees.	requ	ired
Special Inspections as required by the State of North Carolina		

Special '	Inspections as	required by	v the State o	of North	Carolina
Special.	mspections as	required by	, the state o	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Cui omiu

Festivals, Parades, or Special Events not sponsored or co-sponsored by Lincoln County		
\$	100.00	
\$	200.00	
\$	25.00	
\$	20.00	
\$	25.00	
\$	30.00	
\$	35.00	
\$	40.00	
\$	45.00	
\$	25.00	
\$	50.00	
\$	125.00	
\$	125.00	
\$	150.00	
\$	200.00	
	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	

Personnel and apparatus necessary for standby will be determined by the Fire Chief and Fire Marshal.

## State Mandated Periodic Fire Inspections (see footnotes 1-15) Ordinary Risk Occupancies Inspected every 36 months

Small Assembly-Group A; Business-Group B; Merchant-Group M; Storage-Group S; Utility-Group U (per building)

A = A = A = A = A = A = A = A = A = A =	
Less than 501 sq ft	\$ 25.00
501 to 2,500 sq ft	\$ 50.00
2,501 to 10,000 sq ft	\$ 75.00
10,001 to 20,000 sq ft	\$ 100.00
Greater than 20,000 sq ft	\$ 125.00

No Re-inspection fee if all violations are corrected or cleared from first inspection.

Re-inspection, if all violations haven't been corrected or cleared from first inspection (per building)

Δ <i>U</i>	
Less than 501 sq ft	\$ 50.00
501 to 2,500 sq ft	\$ 75.00
2,501 to 10,000 sq ft	\$ 100.00
10,001 to 20,000 sq ft	\$ 125.00
Greater than 20,000 sq ft	\$ 150.00

No Re-inspection fee if all violations are corrected or cleared from second inspection.

Re-inspection, if all violations haven't been corrected or cleared from second inspection (per building)

Less than 501 sq ft	\$ 75.00
501 to 2,500 sq ft	\$ 125.00
2,501 to 10,000 sq ft	\$ 125.00
10,001 to 20,000 sq ft	\$ 150.00
Greater than 20,000 sq ft	\$ 175.00

State Mandated Periodic Fire Inspections (see footnotes 1-15) Moderate Risk Occupancies Inspected every 24 months

Educational-Group E Pubic and Private Schools; Factory/Industrial-Group F

(per building)	
Less than 501 sq ft	\$ 25.00
501 to 2,500 sq ft	\$ 50.00
2,501 to 10,000 sq ft	\$ 75.00
10,001 to 20,000 sq ft	\$ 100.00
20,001 to 40,000 sq ft	\$ 125.00
40,001 to 80,000 sq ft	\$ 150.00
80,001 to 120,000 sq ft	\$ 175.00
120,001 to 150,000 sq ft	\$ 200.00
150,001 to 200,000 sq ft	\$ 225.00
Greater than 200,000 sq ft	\$ 250.00

No Re-inspection fee if all violations are corrected or cleared from first inspection.

Re-inspection, if all violations haven't been corrected or cleared from first inspecti (per building)	on	
Less than 501 sq ft	\$	50.00
501 to 2,500 sq ft	\$	75.00
2,501 to 10,000 sq ft	\$	100.00
10,001 to 20,000 sq ft	\$	125.00
20,001 to 40,000 sq ft	\$	150.00
40,001 to 80,000 sq ft	\$	175.00
80,001 to 120,000 sq ft	\$	200.00
120,001 to 150,000 sq ft	\$	225.00
150,001 to 200,000 sq ft	\$	250.00
Greater than 200,000 sq ft	\$	275.00
No Re-inspection fee if all violations are corrected or cleared from second inspect		
Re-inspection, if all violations haven't been corrected or cleared from second inspe	ctic	n
(per building)		
Less than 501 sq ft	\$	75.00
501 to 2,500 sq ft	\$	125.00
2,501 to 10,000 sq ft	\$	125.00
10,001 to 20,000 sq ft	\$	150.00
20,001 to 40,000 sq ft	\$	175.00
40,001 to 80,000 sq ft	\$	200.00
80,001 to 120,000 sq ft	\$	225.00
120,001 to 150,000 sq ft	\$	250.00
150,001 to 200,000 sq ft	\$	275.00
Greater than 200,000 sq ft	\$	300.00
Mandated Periodic Fire Inspections (see footnotes 1-15) High Risk Occupancies		
Inspected every 12 months		
Hazardous-Group H		
(per building)		
Less than 501 sq ft	\$	50.00
501 to 2,500 sq ft	\$	100.00
2,501 to 10,000 sq ft	\$	150.00
10,001 to 20,000 sq ft	\$	200.00
Greater than 20,000 sq ft	\$	250.00
No Re-inspection fee if all violations are corrected or cleared from first inspection	١.	
Re-inspection, if all violations haven't been corrected or cleared from first inspecti	on	
(per building)		
Less than 501 sq ft	\$	100.00
501 to 2,500 sq ft	\$	125.00
2,501 to 10,000 sq ft	\$	175.00

State

10,001 to 20,000 sq ft	\$	225.00
Greater than 20,000 sq ft	\$	275.00
No Re-inspection fee if all violations are corrected or cleared from second inspect	ion.	
Re-inspection, if all violations haven't been corrected or cleared from second inspe	ctic	n
(per building)		
Less than 501 sq ft	\$	150.00
501 to 2,500 sq ft	\$	175.00
2,501 to 10,000 sq ft	\$	225.00
10,001 to 20,000 sq ft	\$	250.00
Greater than 20,000 sq ft	\$	325.00
State Mandated Periodic Fire Inspections (see footnotes 1-15) High Risk Occupancies Inspected every 12 months		
Large Assembly-Group A		
(per building)		
Capacity 100 to 200	\$	25.00
Capacity 201 to 300	\$	50.00
Capacity 301 to 400	\$	75.00
Capacity 401 to 500	\$	100.00
Capacity greater than 500	\$	125.00
No Re-inspection fee if all violations are corrected or cleared from first inspection	•	
Re-inspection, if all violations haven't been corrected or cleared from first inspection	on	
(per building)		
Capacity 100 to 200	\$	50.00
Capacity 201 to 300	\$	75.00
Capacity 301 to 400	\$	100.00
Capacity 401 to 500	\$	125.00
Capacity greater than 500	\$	150.00
No Re-inspection fee if all violations are corrected or cleared from second inspect	ion.	
Re-inspection, if all violations haven't been corrected or cleared from second inspection (per building)		
Capacity 100 to 200	\$	75.00
Capacity 201 to 300	\$	125.00
Capacity 301 to 400	\$	125.00
Capacity 401 to 500	\$	150.00
Capacity greater than 500	\$	175.00
entrary Premis municipal	4	1.0.00

25.00 50.00

State Mandated Periodic Fire Inspections (see footnotes 1-15) High Risk Occupancies
Inspected every 12 months

Educational/Day Care-Group E; Institutional-Group I, R-4, and R-3 Group Homes	
(per building)	
Licensed for 1 to 5	\$
Licensed for 6 or more	\$

No Re-inspection fee if all violations are corrected or cleared from first inspection.

Re-inspection, if all violations haven't been corrected or cleared from first inspection (per building)

Licensed for 1 to 5 \$ 50.00 Licensed for 6 or more \$ 75.00

No Re-inspection fee if all violations are corrected or cleared from second inspection.

Re-inspection, if all violations haven't been corrected or cleared from second inspection

Licensed for 1 to 5	\$ 75.00
Licensed for 6 or more	\$ 125.00

### Hospitals

First inspection	\$	125.00
Second Inspection, if all violations haven't been corrected or		
cleared from first inspection	\$	150.00
Third Inspection, if all violations haven't been corrected or		
cleared from second inspection	\$	300.00

State Mandated Periodic Fire Inspections (see footnotes 1-15) High Risk Occupancies Inspected every 12 months

Residential-Group R-1 (sleeping rooms) and R-2 (common area only)

(number	of s	leeping	rooms)	)
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1 to 30	\$ 25.00
31 to 50	\$ 50.00
51 to 75	\$ 75.00
76 to 99	\$ 100.00
Greater than 99	\$ 150.00

No Re-inspection fee if all violations are corrected or cleared from first inspection.

## Re-inspection, if all violations haven't been corrected or cleared from first inspection (number of sleeping rooms)

1 to 30	\$ 50.00
31 to 50	\$ 75.00
51 to 75	\$ 100.00
76 to 99	\$ 125.00
Greater than 99	\$ 175.00

No Re-inspection fee if all violations are corrected or cleared from second inspection.

Re-inspection, if all violations haven't been corrected or cleared from second in (number of sleeping rooms)	spectio	n
1 to 30	\$	75.00
31 to 50	\$	125.00
51 to 75	\$	125.00
76 to 99	\$	150.00
Greater than 99	\$	200.00
High Rise (common use and service areas only)		
First inspection	\$	125.00
Second Inspection, if all violations haven't been corrected or		
cleared from first inspection	\$	150.00
Third Inspection, if all violations haven't been corrected or		
cleared from second inspection	\$	300.00
l Citations and Fines-Any violation incurred more than a year after issuance of the shall be treated as a first offense for the purpose of establishing and imposing p		
All open burning violations listed in the Lincoln County FPAPO and NC SBCF warning or civil citation	PC ma	y issue a
First offense	\$	50.00
Second offense	\$	100.00
Third offense and each offense after	\$	200.00
All Fire Lane, Hydrant, Haz-Mat and False Alarm Violations may issue a warni civil citation	ng or	
First offense	ď	50.00
Second offense	\$ \$	50.00
Third offense and each offense after		100.00
	\$	200.00
All violations of Lincoln County FPAPO or NC SBCFPC not listed in this secti warning or civil citation	on may	/ issue a
First offense	\$	50.00
Second offense	\$	100.00
Third offense and each offense after	\$	200.00
All violations of the Occupancy Limit established pursuant to the NC SBCFPC warning or civil citation	may is	sue a
First offense	\$	150.00
Second offense	\$	250.00
Third offense and each offense after	\$	500.00
All violations of the locked or blocked exits in the NC SBCFPC shall issue a ci	4	
First offense	\$	150.00
Second offense	\$	250.00
Third offense and each offense after	φ <b>\$</b>	500.00
Time offense and each offense after	Ψ	200.00

Civil

Life Safety Equipment installed without permit \$250.00 Life Safety Equipment installed without plans \$250.00

Occupying a structure without Certificate of Occupancy \$ 250.00 each day

- 1) The building or structure shall not be occupied prior to the fire code official issuing a permit and conducting associated inspections indicating the applicable provisions of this code had been met, also includes change of occupancy.
- 2) All issued permits shall be kept on the premises designated therein at all times and shall be readily available for inspection.
- Permits may be revoked for reasons as listed in the Lincoln County FPAPO and NC SBCFPC.

LC FPAPO-Lincoln County Fire Prevention and Protection Ordinance; NC SBCFPC- North Carolina State Building Code Fire Prevention Code

A delinquency charge shall be imposed at a rate determined by the fire code official for failure of payment based on provisions set for in the Fire Protection Ordinance.

All permits registered under the False Alarm Ordinance shall be renewed annually. System installation prior to plan review or permit issuance will result in double fees.

#### Footnotes:

- 1) For multi-occupancy buildings, other than residential or institutional, fees are per occupancy.
- 2) For single buildings where there are more than four occupancies, all occupants agree to a continuing inspection date, and a single invoice is paid through the building owner(s) or agent, a 33.3% discount on the first inspection fee is available. No discounts are available on re-inspections due to non-compliance.
- 3) For multiple buildings owned by the same owner(s), the fees are per building as defined by the NC State Building Code.
- 4) Subsequent re-inspections beyond the second re-inspection with violations not cleared will result in doubled fees with each necessary re-inspection of continuing violations, with no fee cap.
- 5) High-rise buildings shall be assessed a fee for the common use areas per section C5.
- 6) Inspections will match the State mandated minimum inspection frequency. The Fire Chief can authorize a specific occupancy classification to be inspected more frequently, but not less frequently.
- 7) At the time of the periodic inspection for the occupancy or premise operation, if an operational permit is required, that permit fee is included with the periodic inspection fee for that permit type.
- 8) Occupancies that are current with the fire inspection fees as outlined above are not charged staff time for staff fire safely training. Occupancies that are not current or not covered by the above fee schedule will be charged according to the hourly rate fee schedule for staff fire safety training.
- 9) Lincoln County schools are inspected every six months, as required by state statute.
- 10) Premises, complexes, and/or uses that are not covered by the above fee schedule will be charged according to the hourly rate fee schedule for the specialist rank.

- 11) Large assembly occupancies used primarily for worship and that are not used for exhibition or display purposes are inspected on a 36 month schedule regardless of occupant load, in accordance with the North Carolina State Fire Code.
- 12) Parking garages, greenhouses, sheds, stables, tanks, and towers will be charged according to the hourly rate fee schedule for the specialist rank.
- 13) Accessory buildings, such as clubhouses, maintenance sheds, etc., are inspected independently based on their occupancy type.
- 14) Charges for standby personnel and/or equipment shall be charged per section F and G. Permits that are fee exempt or pay a reduced rate are also exempt or pay a reduced fee for these services.
- 15) The following are exempt from inspection fees: Public and Charter schools, County operated buildings, and Emergency Service buildings. (No exception of other fees.)
- 16) Certain fees may be waived at the discretion of the Fire Marshal on an individual basis.



## **HEALTH**

CPT		
<u>Code</u>	CPT Title (Fee per unit)	
82550	Creatine kinase (cardiac enzyme) level	\$ 4.67
80076	(Hepatic Function) Liver function blood test panel	\$ 5.11
J3490	17 Alpha Hydroxprogesterone Caporoate, bulk powder	
	250 mg (17P)	\$ 19.80
90649	4V HPV vaccine 3 dose IM	\$ -
82570	24 hour urine creatinine measurement	\$ 8.00
96372	Admin. of anti D immunoglobulin	\$ -
90707	Admin. of first measles-mumps-rubella	\$ 93.00
90460	Admin. of first vaccine or toxoid component through	
	18 yrs of age w with counseling	\$ 23.00
G0008	Administration of influenza virus vaccine	\$ 30.00
G0009	Administration of pneumococcal vaccine	\$ 26.00
90715	Administration of TDaP vaccine	\$ 52.00
92031	AFP	\$ 64.25
99408	Alcohol/substance screen & interven 15-30 min	\$ 69.00
99409	Alcohol/substance screen & intervention >30 min	\$ 159.00
95115	Allergy Shot	\$ 19.00
95117	Allergy Shot x2	\$ 23.00
84460	ALT	\$ 3.89
82120	Amines Vaginal Fluid Qual	\$ 12.00
G0438	Annual Wellness Initial (Medicare)	\$ 291.00
G0439	Annual Wellness Subsequent (Medicare)	\$ 262.00
86631FP	Anitbody; chlamydia	\$ 15.03
86631	Anitbody; chlamydia	\$ 15.03
86632FP	Anitbody; chlamydia, igm	\$ 16.14
86632	Anitbody; chlamydia, igm	\$ 16.14
86694FP	Antibody; herpes simplex, non-specific type test	\$ 18.27
86694	Antibody; herpes simplex, non-specific type test	\$ 18.27
86695FP	Antibody; herpes simplex, type i	\$ 16.77
86695	Antibody; herpes simplex, type i	\$ 16.77
86695FP	Antibody; herpes simplex, type 2	\$ 24.62
86695	Antibody; herpes simplex, type 2	\$ 24.62
86701FP	Antibody; hiv-1	\$ 11.29
86701	Antibody; hiv-1	\$ 11.29

86702FP	Antibody; hiv-2	\$	14.95
86702	Antibody; hiv-2	\$	14.95
86790	Antibody; virus, not elsewhere specified	\$	_
85018	Arterial blood hemoglobin measurement by oximetry	\$	10.00
20610	Arthrocentesis of hip	\$	70.00
99420	Assessment for suicidality	\$	15.00
84450	AST	\$	3.89
11730	Avulsion of nail plate	\$	87.00
87205	Babesia microti smear	\$	13.00
81025	Beta-HCG, urine, qual	\$	22.00
11100	Biopsy of single growth of skin and/or tissue	\$	100.00
S4993	Birth Control Pills	CO	
S9442	Birthing class (one unit = 1 hour)	\$	8.69
85013	Blood count; spun microhematocrit	\$	3.01
85013FP	Blood count; spun microhematocrit	\$	3.01
36415	Blood draw, venipuncture	\$	17.00
82947	Blood glucose level	\$	15.00
83036	Blood hemoglobin A1c/total hemoglobin ratio	\$	21.00
85610Q	Blood test, clotting time	\$	5.96
80061Q	Blood test, lipids (cholesterol and triglycerides)	\$	8.42
80048	BMP	\$	5.34
76977	Bone Mineral Density Scan	\$	45.00
96127	Brief emotional or behaviorial assessment	\$	4.49
96161	Brief MH Depression	\$	-
84520	BUN	\$	4.00
36416	Capillary blood collection	\$	7.50
69210	Cerumen removal (Ear Irrigation)	\$	112.00
87210	Cervical wet mount	\$	21.00
71010	Chest X-ray (contract)	\$	7.00
87491	Chlamydia trachomatis confirm amplified probe	\$	-
82465	Cholesterol total	\$	12.00
58300	Coil insertion	\$	161.00
85027	Complete blood cell count (red cells, white blood cell,		
	platelets), automated test	\$	3.32
85025	Complete blood count (CBC) with platelet count and		
	automated WBC differential	\$	4.49
80053	Comprehensive metabolic panel	\$	6.67
58301	Contraception, device intrauterine, removal	\$	196.00
91300-0001A	COVID Vaccination - Pfizer 1st Dose	\$	40.00
91300-0002A	COVID Vaccination - Pfizer 2nd Dose	\$	40.00
91301-0011A	COVID Vaccination - Moderna 1st Dose	\$	40.00
91301-0012A	COVID Vaccination - Moderna 2nd Dose	\$	40.00
91303-0031A	COVID Vaccination - Janssen Single Dose	\$	40.00
82565	Creatinine	\$	3.89

87070	Cul bact xcpt urine blood/stool aerobic isol	\$	13.00
87077	Culture, bacterial; aerobic isolate, additional methods		
	required for definitive	\$	10.27
87086	Culture, bacterial; quantitative colony count, urine	\$	56.43
87110FP	Culture, chlamydia, any source	\$	24.91
87110	Culture, chlamydia, any source	\$	24.91
87081	Culture, presumptive, pathogenic organisms-screening only	\$	19.00
J1020	Depo Medrol 20mg	\$	6.00
J1030	Depo Medrol 40mg	\$	12.00
J1040	Depo Medrol 80mg	\$	17.00
17110	Destruction 11-14 benign skin lesions, not skin tags or		
	vascular proliferative	\$	116.00
17003	Destruction of 2-14 skin growths	\$	12.00
17000	Destruction of skin growth	\$	74.00
17111	Destruction by any method of flat warts	\$	91.22
46900	Destruction of lesion(s), anus(eg, condyloma, papilloma)	\$	160.97
54065	Destruction of lesion(s), penis(eg, condyloma, papilloma,		
	molluscum)	\$	168.63
87535	Detection test for HIV-1 virus	\$	160.23
87623	Detection test for human papillomavirus (HPV)	\$	31.18
87624	Detection test for human papillomavirus (HPV)	\$	31.18
87804	Detection test for influenza virus- A & B	\$	42.00
96110	Developmental screening w/interp&reprt std for	\$	18.00
80162	Digoxin	\$	13.84
80185	Dilantin (Phenytoin)	\$	37.41
80307	Drug scr qual 1 drug class meth ea drug class	\$	51.75
90701	DTAP	\$	-
90698	DTaP hemophilus influenza B polio vaccination	\$	112.00
90700	DTaP immunization	\$	31.00
90723	DTaP-HepB-IPV vaccine intramuscular	\$	84.00
93000	ECG (electrocardiogram)	\$	41.00
99397	Estab. pt physical exam; 65 years and over	\$	175.00
82677	Estriol	\$	30.75
J7307UD	Etonogestrel (contraceptive) implant system, including		
	implant and supplies	CC	OST
J7307	Etonogestrel (contraceptive) implant system, including		
	implant and supplies	\$	1,097.00
57452	Examination of vagina	\$	85.22
11200	Excision of skin tag	\$	173.00
56501	Female-Wart Treatment	\$	218.00
82728	Ferritin	\$	7.52
76819	Fetal biophysical profile; without non-stress testing	\$	75.32
82731	Fetal fibronectin, cervicovaginal secretions, semi-quant.	\$	81.89
Q2038	Fluzone vacc, 3 yrs & >, IM	\$	20.00

82746	Folate	\$ 7.28
83001	FSH	\$ 7.52
J1460	Gamma globulin, intramuscular, 1 cc, injection	
	(Gamastan S/D)	\$ 11.02
J1560	Gamma globulin, intramuscular, over 10 cc, injection	
	(Gamastan S/D)	\$ 110.27
90651	Gardisil 9 (HPV) State	\$ -
90651	Gardisil 9 (HPV) State and Private	\$ 272.00
82948	Glucose blood stick test	\$ 4.03
82950	Glucose Challenge	\$ 17.00
82952	Glucose Tolerance >3	\$ 12.00
87591	Gonorrhea	\$ 18.44
82951	GTT Glucose Tolerance	\$ 28.00
99000	Handling of lab specimen	\$ 23.00
84702	HCG beta QN	\$ 13.00
96160	Health A Risk/ MCHAT	\$ 13.00
96150	Health and behavior assessment (eg, health-focused	
	clinical interview	\$ 19.25
96151	Health and behavior assessment (eg, health-focused	
	clinical interview	\$ 18.63
92551	Hearing screening	\$ 19.00
92552	Hearing test	\$ 16.65
85014	Hematocrit	\$ 6.00
83020	Hemoglobin A1C	\$ 18.00
83036Q	Hemoglobin A1C level	\$ 8.11
90647	Hemophilus influenza B vaccine prp-omp 3 dose IM	\$ 31.00
90633	Hep A Ped <19	\$ 39.00
87340	Hep B Antigen	\$ -
86803	Hep C Antibody	\$ 12.92
90636	Hepatitis A & B vaccine HepA-HepB adult IM	\$ 129.00
90632	Hepatitis A vaccine, adult dosage, for intramuscular use	\$ 82.00
90744	Hepatitis B immuniz, peds/adolesc	\$ 24.00
90371	Hepatitis B immune globulin (HBIG), human, IM	\$ 114.50
86706	Hepatitis B surface antibody (HBsAb)	\$ 10.38
90746	Hepatitis b vaccine, adult dosage (3 dose schedule),	
	for intramuscular use	\$ 81.00
87253	Herpes Culture	\$ -
90645	HIB n/c HBOC	\$ -
10060	Hidradenitis incision and drainage	\$ 262.00
99205	High level new patient office visit	\$ 488.00
86703	HIV Rapid	\$ 16.65
87389	HIV Screen	\$ -
82270	Home fecal occult blood kit for 3 specimens	\$ 10.00
99502	Home visit for newborn care	\$ 60.00

99501	Home visit for postnatal assessment	\$	60.00
G0328	IFOBT( Immunochemical fecal occult blood test)	\$	23.00
90473	Imadm intransl/oral 1 vaccine	\$	23.00
90474	Imadm intransl/oral ea vaccine	\$	23.00
90471	Imadm prq id subq/im njxs 1 vaccine	\$	27.00
90472	Imadm prq id subq/im njxs ea vaccine	\$	27.00
J1561	Immune Globulin, Intravenous, 500 mg, injection	4	27.00
01001	(Gamunex)	\$	31.93
J1566	Immune Globulin, Intravenous, lyophilized, (e.g. powder)	4	01.70
	500 mg, injection (Gammagard S-D)	\$	26.79
J1562	Immune Globulin, subcutaneous, 100 mg (Vivaglobin)	\$	6.76
90713	Inactivated poliovirus (IPV) vaccination	\$	42.00
87270FP	Infectious agent antigen detection by direct fluorescent	Ψ	.2.00
0,2,011	antibody technique	\$	14.57
87270	Infectious agent antigen detection by direct fluorescent	4	1
0,2,0	antibody technique	\$	14.57
87285FP	Infectious agent antigen detection by direct fluorescent	4	1 ,
0,20011	antibody technique	\$	14.57
87285	Infectious agent antigen detection by direct fluorescent	4	1 ,
0.200	antibody technique	\$	14.57
87320FP	Infectious agent antigen detection by enzyme	4	
	immunoassay technique; qualitative	\$	14.57
87320	Infectious agent antigen detection by enzyme	·	
	immunoassay technique; qualitative	\$	14.57
87390FP	Infectious agent antigen detection by enzyme		
	immunoassay technique; qualitative	\$	22.43
87390	Infectious agent antigen detection by enzyme		
	immunoassay technique; qualitative	\$	22.43
87391FP	Infectious agent antigen detection by enzyme		
	immunoassay technique; qualitative	\$	22.43
87391	Infectious agent antigen detection by enzyme		
	immunoassay technique; qualitative	\$	22.43
87810FP	Infectious agent detection by immunoassay with direct		
	optical observation	\$	14.57
87810	Infectious agent detection by immunoassay with direct		
	optical observation	\$	14.57
87850FP	Infectious agent detection by immunoassay with direct		
	optical observation	\$	14.57
87850	Infectious agent detection by immunoassay with direct		
	optical observation	\$	14.57
87273FP	Infectious agent antigen detection by immunofluorescent		
	technique; herpes	\$	14.57
87273	Infectious agent antigen detection by immunofluorescent		
	technique; herpes	\$	14.57

87274FP	Infectious agent antigen detection by immunofluorescent		
	technique; herpes	\$	14.57
87274	Infectious agent antigen detection by immunofluorescent		
	technique; herpes	\$	14.57
87490FP	Infectious agent detection by nucleic acid (dna or rna);		
	chlamydia trachomatis	\$	25.50
87490	Infectious agent detection by nucleic acid (dna or rna);		
	chlamydia trachomatis	\$	25.50
87492FP	Infectious agent detection by nucleic acid (dna or rna);		
	chlamydia trachomatis	\$	41.41
87492	Infectious agent detection by nucleic acid (dna or rna);		
	chlamydia trachomatis	\$	41.41
87510	Infectious agent detection by nucleic acid (dna or rna);		
	gardnerella vaginalis	\$	25.50
87528FP	Infectious agent detection by nucleic acid (dna or rna);		
	herpes simplex virus	\$	25.50
87528	Infectious agent detection by nucleic acid (dna or rna);		
	herpes simplex virus	\$	25.50
87529FP	Infectious agent detection by nucleic acid (dna or rna);		
	herpes simplex virus	\$	31.18
87529	Infectious agent detection by nucleic acid (dna or rna);		
	herpes simplex virus	\$	31.18
87530FP	Infectious agent detection by nucleic acid (dna or rna);		
	herpes simplex virus	\$	41.41
87530	Infectious agent detection by nucleic acid (dna or rna);		
	herpes simplex virus	\$	41.41
87534FP	Infectious agent detection by nucleic acid (dna or rna);		
	hiv-1, direct probe	\$	25.50
87534	Infectious agent detection by nucleic acid (dna or rna);		
0.550 (550	hiv-1, direct probe	\$	25.50
87536FP	Infectious agent detection by nucleic acid (dna or rna);	Φ.	
0==0.5	hiv-1, quantification	\$	67.59
87536	Infectious agent detection by nucleic acid (dna or rna);	Φ.	
0753750	hiv-1, quantification	\$	67.59
87537FP	Infectious agent detection by nucleic acid (dna or rna);	Φ.	25.50
05505	hiv-2, direct probe	\$	25.50
87537	Infectious agent detection by nucleic acid (dna or rna);	Φ.	25.50
07520ED	hiv-2, direct probe	\$	25.50
87538FP	Infectious agent detection by nucleic acid (dna or rna);	Φ.	24.40
07.00	hiv-2, amplified probe	\$	31.18
87538	Infectious agent detection by nucleic acid (dna or rna);	Φ.	21.10
05500	hiv-2, amplified probe	\$	31.18
87539FP	Infectious agent detection by nucleic acid (dna or rna);		
	hiv-2, quantification	\$	41.41

87539	Infectious agent detection by nucleic acid (dna or rna); hiv-2, quantification	\$	41.41
87590FP	Infectious agent detection by nucleic acid (dna or rna);	Ф	41.41
0/3901T	neisseria gonorrhoeae	\$	25.50
87590	Infectious agent detection by nucleic acid (dna or rna);	φ	25.50
07390	neisseria gonorrhoeae	\$	25.50
87592FP	Infectious agent detection by nucleic acid (dna or rna);	φ	25.50
0/39211	neisseria gonorrhoeae	\$	41.41
87592	Infectious agent detection by nucleic acid (dna or rna);	φ	41.41
01372	neisseria gonorrhoeae	\$	41.41
87660	Infectious agent detection by nucleic acid (dna or rna);	Ψ	71.71
87000	trichomonas vaginalis	\$	25.50
90685	Influenza 6-35 State	\$ \$	29.00
90662	Influenza High Dose	\$	58.00
90658	Influenza virus vaccine split virus 3/>yrs IM	\$	25.00
90686	Infuenza 2-49	\$ \$	29.00
99381	Initial preventive medicine new patient <1 year	\$	258.00
99386	Initial preventive medicine new patient <1 year  Initial preventive medicine new patient 40-64 yrs	э \$	376.00
99384	Initial preventive medicine new pt age 12-17 yr	э \$	279.00
99382	Initial preventive medicine new pt age 1-4 yrs	э \$	258.00
99385	Initial preventive medicine new pt age 18-39yrs	э \$	267.00
99383	Initial preventive medicine new pt age 5-11 yrs	э \$	320.00
J0696		э \$	
J0696 J1571	Injection, ceftriaxone sodium, per 250 mg	Ф	21.00
J13/1	Injection, hepatitis B immune globulin, intramuscular,	\$	46.14
J1050ud	0.5 ml, (Hepagam B)		46.14 OST
J1050uu J1050	Injection, medroxyprogesterone acetate, 1 mg	\$	81.00
J1030 J1071	Injection, medroxyprogesterone acetate, 1 mg		8.00
	Injection, testosterone cypionate, 1 mg 200 units	\$ \$	58.00
20552 11981	Injection-Trigger	э \$	
	Insertion of drug implant, non-biodegradable	Ф	218.00
99407	Intensive smoking and tobacco use cessation	\$	51.00
99406	counseling visit	Э	51.00
99400	Intermediate smoking and tobacco use cessation	\$	27.00
J7300ud	counseling visit		27.00 OST
J7300ud J7300	Intrauterine copper contraceptive Intrauterine copper contraceptive	\$	
83550	Iron/TIBC		1,090.00 4.83
96360	IV Infusion	\$ \$	60.00
J1885		\$ \$	6.00
90696	Ketorolac Injection (15mg x4= 2cc) Kinrix	э \$	
			63.00
J1940 83655	Lasix Injection Lead	\$ \$	6.00
		Ф	20.78
J7296	Levonorgestrel-releasing intrauterine contraceptive	Φ	565.00
	system, (kyleena), 19.5 mg	\$	565.00

J7302	Levonorgestrel-releasing intrauterine contraceptive		
	system, 52 mg	\$	745.23
83002	LH (Luteinizing Hormone)	\$	7.52
J3490	Lidocaine, for typical use	Inv	oice Req
76857	Limited or follow-up (eg, for follicles)	\$	77.65
80061	Lipid panel	\$	38.00
80178	Lithium	\$	16.91
99212	Low level established patient office visit	\$	117.00
99202	Low level new patient office visit	\$	190.00
54050	Male-Wart Treatment	\$	186.00
59425	Maternity Global Billing (4-7 visits)	\$	1,046.00
59426	Maternity Global Billing (7+ visits)	\$	1,926.00
90734	Meningococcal conj vaccine tetravalent im	\$	151.00
90733	Meningococcal polysaccharide vaccine (any group(s)),		
	for subcutaneous use	\$	140.00
82043	Microablumin	\$	12.01
99211	Minor level established patient office visit	\$	63.00
99201	Minor level new patient office visit	\$	124.00
J7298	Mirena	CC	OST
99213	Moderate level established patient office visit	\$	168.00
99203	Moderate level new patient office visit	\$	267.00
99214	Moderate-high level established patient office visit	\$	252.00
99204	Moderate-high level new patient office visit	\$	391.00
82105	MSAFP, Quad	\$	149.00
86735	Mumps immune status detection by antibody assay	\$	21.35
99387	New pt physical exam; 65 years and over	\$	215.00
99501	Newborn Home Screening - Mom visit	\$	58.29
99502	Newborn Home Screening - Newborn visit	\$	60.00
T1001	Nursing assessment/evaluation	\$	87.09
J7303	Nuva Ring -Contraceptive supply, hormone containing		
	vaginal ring, each	\$	23.00
80055	Obstetric blood test panel	\$	36.17
99215	Office outpatient visit 40 minutes	\$	357.00
99421	Online digital evaluation and management ser.	\$	66.95
99422	Online digital evaluation and management ser.	\$	92.50
99423	Online digital evaluation and management ser.	\$	143.63
99241FP	Outpt. Consult, minor-phys time approx 15 min.	\$	39.98
99241	Outpt. Consult, minor-phys time approx 15 min.	\$	39.98
99242FP	Outpt. Consult, moderate-phys time approx 30 min.	\$	74.90
99242	Outpt. Consult, moderate-phys time approx 30 min.	\$	74.90
99243FP	Outpt. Consult, severe-phys time approx 40 min.	\$	103.00
99243	Outpt. Consult, severe-phys time approx 40 min.	\$	103.00
99244FP	Outpt. Consult, severe-phys time approx 60 min.	\$	152.99
99244	Outpt. Consult, severe-phys time approx 60 min.	\$	152.99

99245FP	Outpt. Consult, severe-phys time approx 80 min.	\$	188.03
99245	Outpt. Consult, severe-phys time approx 80 min.	\$	188.03
88175	Pap, Thin Prep	\$	20.00
88141	Pathologist Review	\$	15.00
99394	Periodic preventive med est patient 12-17yrs	\$	250.00
99392	Periodic preventive med est patient 1-4yrs	\$	244.00
99395	Periodic preventive med est patient 18-39 yrs	\$	245.00
99396	Periodic preventive med est patient 40-64yrs	\$	319.00
99393	Periodic preventive med est patient 5-11yrs	\$	252.00
99391	Periodic preventive med established patient <1y	\$	244.00
83986	PH body fluid except blood	\$	4.55
99441	Phone e/m phys/qhp 5-10 min	\$	11.80
99442	Phone e/m phys/qhp 11-20 min	\$	22.37
99443	Phone e/m phys/qhp 21-30 min	\$	33.02
90670	Pneumococcal conjugate vaccine, 13 valent, for	Ψ	33.02
20070	intramuscular use	\$	255.00
90732	Pneumococcal vaccination	\$	126.00
59430	Post-delivery care	\$ \$	105.89
84132	Potassium ser	\$ \$	3.71
86580	PPD - TB Intradermal Test	\$ \$	23.00
S0281		\$ \$	23.00
84703	Pregnancy Medical Home - maintenance of plan		701
	Pregnancy, serum	\$	7.84
94640	Pressurized/nonpressurized inhalation treatment	\$	17.00
99412	Prev med counsel & risk factor redj grp spx 60 m	\$	25.00
84146	Prolactin	\$	45.17
90710	Proquad (MMR/VARIVAX)-private	\$	280.00
85610	Prothrombin time;	\$	26.00
84153	PSA	\$	8.83
90675	Rabies	\$	360.00
90375	Rabies immune globulin (RIG), 2ML, human, for	4	- 1 <b>-</b> 1
000=	intramuscular AND/OR subcutaneous use	\$	64.74
90376	Rabies immune globulin, heat-treated (RIG-HT)	4	
	2ML, human, intramuscular and/or	\$	74.52
86382	Rabies Titer	\$	122.00
11982	Removal of drug implant, non-biodegradable	\$	250.00
11983	Replacement of drug implant, non-biodegradable	\$	389.00
86431	Rheumatoid factor level	\$	7.12
J2788	Rho(D) Immune Globulin, 50 mcg	\$	27.14
J2790	Rho(D) Immune Globulin, human, full dose, 300 mcg	\$	85.63
J2791	Rho(D) Immune Globulin, human, intramuscular or		
	intravenous, 100 IU, injection	\$	5.09
J2792	Rho(D) Immune Globulin Intravenous, human, solvent		
	detergent, 100 IU, injection	\$	14.91
S0280	Risk Screening	\$	50.00

T1002	RN services, up to 15 minutes	\$	51.00
90681	Rotarix	\$	159.00
90680	Rotavirus vaccine, pentavalent, 3 dose schedule, live,		
	for oral use	\$	114.00
86762	Rubella Titer (German Measles	\$	7.65
86765	Rubeola (Measles Titer)	\$	26.18
85652	Sed Rate - Red blood cell sedimentation rate, to detect		
	inflammation	\$	5.00
11305	Shaving of 0.5 cent. or less skin growth of scalp, neck,		
	hands, feet, or genitals	\$	49.03
11201	Skin Tag Rmoval (additional 10)	\$	18.00
J7301	Skyla	CO	ST
87207FP	Smear, primary source with interpretation; special stain		
	for inclusion bodies	\$	7.62
87207-26	Smear, primary source with interpretation; special stain		
	for inclusion bodies	\$	15.48
87207	Smear, primary source with interpretation; special stain		
	for inclusion bodies	\$	7.62
J2930	Solu Medrol	\$	7.00
94010	Spriometry	\$	70.00
87072	Sputum Culture	\$	-
87045	Stool culture	\$	11.63
87880	Strep test (Streptococcus, group A)	\$	33.00
S0630	Suture Removal	\$	12.00
86593	Syphilis Screen	\$	-
86592	Syphilis test, non-treponemal antibody; qualitative		
	(eg, VDRL, RPR, ART)	\$	-
84481	T3 Free	\$	6.23
84480	T3 Total	\$	6.23
84479	T3, Uptake	\$	4.58
84439	T4 Free	\$	6.23
84436	T4, Total	\$	4.49
11102	Tangential biopsy of skin single lesion (scrape)	\$	105.43
99446	Telephone or internet assessment and man.	\$	21.28
99447	Telephone or internet assessment and man.	\$	42.97
99448	Telephone or internet assessment and man.	\$	64.25
99449	Telephone or internet assessment and man.	\$	85.61
84403	Testosterone	\$	8.57
90714	Tetanus and diphtheria toxoids (Td)	\$	41.00
90389	Tetanus Immune Globulin (Tgi), Human, for Intramuscular		
	use, 250 U/1 ml (BayTet)	\$	133.57
84155	Total protein level, blood	\$	3.89
86780	Treponema pallidum	\$	17.26
84443	TSH	\$	6.38

86480	Tuberculosis test	\$ 66.18
84550	Uric Acid, Serum	\$ 4.33
81003	Urinalysis dipstick only	\$ 8.00
81000FP	Urinalysis dipstick or tablet reagent for bilirubin, glucose	
	hemoglobin	\$ 4.03
81000	Urinalysis dipstick or tablet reagent for bilirubin, glucose	
	hemoglobin	\$ 4.03
81001	Urinalysis w/ microscope	\$ 20.00
81002	Urinalysis routine w/o microscopy	\$ 3.25
81002FP	Urinalysis routine w/o microscopy	\$ 3.25
82175	Urine Heavy Metal	\$ 71.00
90702	Vaccination, diphtheria and tetanus	\$ 58.00
80164	Valprocic Acid (Depakene)	\$ 20.05
90716	Varicella virus vaccine, live, for subcutaneous use	\$ 162.00
86787	Varicella-zoster IgG ab	\$ 20.78
90396	Varicella-zoster immune globulin, human, for	
	intramuscular use (125 units)	\$ 105.38
99173	Vision Test	\$ 15.00
82607	Vitamim B-12 Level	\$ 7.54
J3420	Vitamin B-12	\$ 9.00
82306	Vitamin D	\$ 20.78
11042	Wound debridement	\$ 52.00
J7304	Xulane Patch-Contraceptive supply, hormone containing	
	patch, each	\$ 81.00
90736	Zostavax 60+	\$ 262.00



## **LIBRARY**

Lost Book Processing Fee	\$ 5.00
Lost Book Replacement Fee	Cost
Out of Region Library Card (per year)	\$ 15.00
Replacement Card	\$ 3.00
Interlibrary Loan (per item)	\$ 5.00
Meeting Room	
City, County, State, or Federal Governmental Agency	No Charge
Lincoln County Based Non-Profit Organization/Individuals	\$ 10.00 per hour
Lincoln County Based For Profit Organization/Individuals	\$ 25.00 per hour
Out-of-County Organization/Individuals	\$ 50.00 per hour
Lost or Damaged Equipment	
Kindle Fire Kids Edition Tablet	\$ 135.00
Kindle Fire Charging Cord	\$ 15.00
Kindle Fire Case	\$ 20.00
Samsung Educational Tablet	\$ 344.00
Samsung Charging Cord	\$ 30.00
Samsung Case	\$ 20.00
Launchpad	\$ 130.00
Launchpad Charging Cord	\$ 6.99
Launchpad Charging Adaptor	\$ 9.99
Orange Bumper	\$ 8.99
Orange Case	\$ 12.99



## **PARKS & RECREATION**

FISCAL YEAR 2021 - 2022

### **RENTALS**

Park Shelters Half Day (10:00 AM - 2:00 PM or 3:00 PM - 7:00PM)	\$ 50.00
Full Day (10:00 AM - 7:00 PM)	\$ 100.00
East Lincoln Community Center	
Meeting Room - 6 Hours	\$ 50.00
Event Room - 6 Hours	\$ 150.00
Event Room - 12 Hours	\$ 300.00
Howards Creek Community Center	
Full Day (8:00 AM - 11:00 PM)	\$ 100.00
Key/Cleaning Deposit	\$ 100.00
North Brook Community Center	
Full Day (8:00 AM - 11:00 PM)	\$ 100.00
Key/Cleaning Deposit	\$ 100.00
REGISTRATIONS	
Day Camp (per child, per week)	\$ 100.00
Senior Games (per participant)	\$ 10.00



## PLANNING AND INSPECTIONS

Administrative		
Hard Copy of Ordinance/Land Use Development Plan		
Unified Development Ordinance	\$	35.00
Land Use Plan	\$	35.00
All other plan documents	\$	15.00
Permit Reports		
Permits issued per month, per quarter, or per year (each)	\$	5.00
Complete inspection record (per permit)	\$	5.00
Permits by Contractor	\$	5.00
Owner/Builder permits issued	\$	10.00
Active permit listing (per year)	\$	20.00
Mass permit printing (per year)	\$	20.00
Any other customized report not listed above	\$	10.00
Phase 1 Environmental Inquiries	\$	50.00
Copies		
Small format copies or prints (per sheet, black and white)	\$	0.10
Small format copies or prints (per sheet, color)	\$	0.35
Large format copies or prints (per sheet, black and white)	\$	5.00
Large format copies or prints (per sheet, color)	\$	15.00
Data Transfer	\$	5.00
Custom Maps		
Maps from existing data		
11 x 17	\$	10.00
18 x 24	\$	15.00
24 x 36	\$	20.00
36 x 48	\$	30.00
22 x 54	\$	35.00
36 x 72	\$	45.00
36 x 96	\$	55.00
Custom Maps Products (New Data)	\$35.00/hr plus	size cost
Street Signs	\$	100.00
Land Use		
Flood Damage Prevention Ordinance		
Development permits	\$	200.00
Zoning		
Residential Permit (including pools and piers)	\$	75.00
Non-residential Permit	\$	100.00
Temporary Use Permit (including accessory care provider)	\$	75.00

Zoning (continued)			
Major Site Plan Review		\$ 1	1,000.00
Map Amendment			
Less than 2 acres		\$	200.00
2 to 5 acres		\$	400.00
5 or more acres		\$	800.00
Non-Conforming Use		\$	200.00
Conditional Use			
Site less than 2 acres		\$	250.00
Site more than 2 acres		\$	500.00
Parallel Conditional Use Rezoning			
Site less than 2 acres		\$	200.00
Site more than 2 acres		\$	400.00
Conditional District			
Less than 2 acres		\$	400.00
2 to 5 acres		\$	800.00
5 or more acres		\$ 1	1,200.00
Planned Development			
51-300 units, or 50,000-100,000 sf of commercial	floor area	\$ 1	1,500.00
301-600 units, 100,000-250,000 sf of commercial	floor area	\$ 3	3,000.00
601 plus units, greater than 250,000 sf comm floo	r area	\$ 3	5,000.00
Zoning Vested Right		\$	250.00
Subdivision			
Minor and Family Subdivision Review	\$150.00 plus \$1	10.0	00 per lot
Major Subdivision Preliminary Approval		\$	300.00
Major Subdivision Review	\$300.00 plus \$2	20.0	00 per lot
Exempt Plat Review		\$	75.00
Letter of Credit/Surety Bond/ Cash Bond (Application a	nd Review)	\$	300.00
Renewal of Letter of Credit/Surety Bond/Cash Bond		\$	150.00
TRC Review		\$	300.00
Watershed			
Site Plan Review	Engineer's fee (Mi	n. \$	300.00)
Annual Inspection Fee	Engineer's fee (Mi		
Conditional Use Permit		\$ 1	1,000.00
Variances, Appeals, and Text Amendments			
Appeal from decision		\$	200.00
Request for variance or relief		\$	400.00
Text amendment		\$	400.00
Historic Preservation		<b>.</b>	100.00
Certificate of Appropriateness		\$	100.00
Local Historic Landmark Designation		\$	200.00

Residential Construction		
Single-Family Residential (Detached/Attache	ed)	
New construction, additions		
Building	\$0.35/sq ft	\$ 100.00
Electrical	\$0.05/sq ft	\$ 75.00
Mechanical	\$0.05/sq ft	\$ 75.00
Plumbing	\$0.05/sq ft	\$ 75.00
Other Residential Structures	•	
Renovations, accessory buildings, mov	red home, and decks	
Building	\$0.15/sq ft	\$ 75.00
Electrical	\$0.05/sq ft	\$ 75.00
Mechanical	\$0.05/sq ft	\$ 75.00
Plumbing	\$0.05/sq ft	\$ 75.00
Manufactured Homes (Blanket permit, include	ling B, E, M, P, and decks)	
Single-wide	_	\$ 300.00
Double-wide		\$ 350.00
Triple-wide		\$ 400.00
Swimming Pools (Building)		\$ 75.00
Swimming Pools (electrical)		\$ 75.00
Swimming Pools (mechanical)		\$ 75.00
Piers, Boatslips, Etc.		\$ 250.00
Temporary Pole Only		\$ 75.00
Temporary Power on Residence		\$ 200.00
(All but \$100.00 to be refunded after fi	inal approval. Refund must	
be requested within 90 days of CO or C	COC.)	
Change of Contractor		\$ 25.00
Demolition Permit		\$ 75.00
Residential Retaining Wall		\$ 75.00
Individual Permits (Residential)		
Electrical Permit Fees		
PV Systems		\$ 150.00
Generators		\$ 150.00
Minimum fee for anything not otherwi	se described here	\$ 75.00
Mechanical Permit Fees		
Minimum fee (per system)		\$ 75.00
Plumbing Permit Fees		
Minimum Fee		\$ 75.00
Grinder Pump Fees		
Private Grinder Pumps are included wi	th the plumbing and electrical	
permit for the house. This fee shall ap	ply if a different contractor	
is installing the grinder pump.		
Electrical		\$ 50.00
Plumbing		\$ 50.00

### Commercial Construction

New Construction, Renovations, Additions, Alterations, and/or Accessory Buildings

Occupancy					
Classification	Bldg	Elec	Plbg	Mech	Total
Assembly	0.08	0.05	0.05	0.05	0.23
Business	0.08	0.05	0.05	0.05	0.23
Educational	0.08	0.05	0.05	0.05	0.23
Factory/Industrial	0.02	0.05	0.05	0.05	0.17
Hazardous	0.08	0.05	0.05	0.05	0.23
Institutional	0.20	0.05	0.05	0.05	0.35
Mercantile	0.08	0.05	0.05	0.05	0.23
Residential	0.20	0.05	0.05	0.05	0.35
Storage	0.08	0.05	0.05	0.05	0.23
Utility	0.08	0.05	0.05	0.05	0.23

Permit fees for new construction shall be calculated using the following formulas:

A = Total Gross Building Floor Area Under Construction

B = Fee per square foot from occupancy classification table above

Building permit fees are to be paid by the general contractor for the building. The individual sub-contractors will be responsible for their permit(s) and fee(s).

Total gross building floor area under construction	Formula
New structures 0-50,000 sq ft	ΑxΒ
New structures 50,000 - 100,000 sq ft	A x B (25% reduction)

New structures 100,000 + sq ft A x B (50% reduction)

Shell permit (Includes Building, Electrical, Mechanical, and Plumbing

A x B (75% reduction)

All commercial renovations, upfit completion, additions, or alterations (any size)

A x B (25% reduction)

Minimum Commercial Permits (for items not covered by the square footage calculation)

Building	\$ 200.00
Electrical	\$ 100.00
Plumbing	\$ 100.00
Mechanical (per system)	\$ 100.00

Commercial Signs (Building Only)

 Wall
 \$ 100.00

 Ground
 \$ 100.00

 Canopy
 \$ 100.00

 Temporary Power
 \$ 500.00

(Refund = Permit Fee less \$300.00 Administrative Charge. Refund must be requested within 90 days of CO or COC.)

Commercial Plan Review

Building, Electric, Mechanical, Plumbing Reviews

\$100.00 per submittal

Miscellaneous		
Change of Tenant/Occupancy	\$	75.00
Licensing of Daycare	\$	300.00
Refund of permit fee with no inspection activity		
Refund = Permit Fee less \$25.00	) Administrative	Charge
Renewal of expired permit (New application required)	Minimum fee	per trade
After hours inspection fee (per hour)	\$	100.00
Non-scheduled inspection/Same day	\$	75.00
Change of Contractor on existing permits	\$	25.00
Commercial Demolition	\$	100.00
Modular Unit-Commercial	\$	350.00
Blanket permit including B, E, M and P permits		
Re-roofing Permit		
Residential	\$	100.00
Commercial	\$	200.00
Storage Racking System Permit	\$	300.00
Mobile Communications		
Tower (Building)	\$	500.00
Tower (Electrical)	\$	500.00
Co-Location Co-Location	\$	500.00
Antenna Mount	\$	500.00
Temporary Structures (Tents, stages, etc.)	\$	100.00
Bleachers	\$	250.00
Handicap Ramp (residential)	N	o Charge
Yearly Maintenance Permit	\$100	.00/trade
Solar Farm		
Electrical	\$	750.00
Building	\$	250.00
Any item not otherwise addressed in this schedule that requires	\$75	5.00/trip
inspection based on Chief Building Officials estimate		
Penalties		
Work started without a permit		Fee x 2
Wasted trip/re-inspection fee*	\$	100.00
*To be used to prevent unnecessary trips to jobsite and to recoup mon	ey lost on waste	ed
visits. Will be charged to an active account, and must be paid in full b	efore the final	

Permit fees for the State of North Carolina, Lincoln County, and the City of Lincolnton shall be waived along with permits for work funded by State or Federal grant funds. Permit fees for completion of work done by community service organizations may be waived by the director.

inspection. Inspections will be halted until payment arrangements are made.



## **REGISTER OF DEEDS**

Deeds of Trust			
First thirty-five page	\$	64.00	
Additional pages	\$	4.00	per page
Recording Fees for All Other Documents			
First fifteen pages	\$	26.00	
Additional pages	\$	4.00	per page
Uniform Commercial Code Records			
One or two pages	\$	38.00	
Three to ten pages	\$	45.00	
Additional pages over ten	\$	2.00	per page
Non-standard Documents (plus recording fee)	\$	25.00	
Multiple Instrument Documents	\$	10.00	each
Plats	\$	21.00	per page
Highway Right-of-Way Plans (plus \$5.00 each add'l page)	\$	21.00	
Other			
Certified Copies - first page	\$	5.00	
Additional pages	\$	2.00	per page
Uncertified Copies	\$	0.25	per page
Uncertified Copies of Plats			
18x24 and 21x30	\$	1.00	
24x36	\$	2.00	
Certified Copies - Birth, Death, and Marriage Certificates	\$	10.00	each
Out of County Birth Certificates (1971 to Current)	\$	24.00	
Amend Birth or Death Certificates	\$	25.00	
Marriage License	\$	60.00	
Delayed Birth Certificates (includes one certified copy)	\$	20.00	
See Statutes if application is made in one county and			
birth occurred in another county.			
Legitimations	\$	25.00	
Administer Notary Oath	\$	10.00	
Authentication Check of Notary	\$	5.00	
Passport Agency Fee	\$	35.00	
Passport Photo	\$	10.00	
Passport Postage Expedite Fee Amount charged by US Postal Serv			



# LINCOLN COUNTY FEES & CHARGES **SENIOR SERVICES**

FISCAL YEAR 2021 - 2022

Yoga (8 week session) \$ 40.00

Activity/Special Programs COST



## **SHERIFF**

Civil Service (per defendant)	\$ 30.00
Fingerprint	\$ 10.00
Gun Permit	\$ 5.00
Concealed Carry Application-New (includes fingerprint)	\$ 90.00
Concealed Carry Renewal	\$ 75.00
Concealed Carry Replacement Card	\$ 15.00
Precious Metal Application (includes SBI and fingerprint)	\$ 228.00



## **SOIL AND WATER**

Erosion and Sediment Control Application (1,000 sq. feet to one acre)	\$ 50.00	
Erosion Control Plan (per acre rounded up to next whole acre)	\$ 200.00	per acre
Express Permitting:		
Application Fee (per acre rounded up to next whole acre)	\$ 200.00	per acre
Supplement (per acre up to maximum of eight acres)	\$ 250.00	per acre
Stormwater Standard Plan Review (per acre rounded up to next whole acre)	\$ 300.00	per acre



## **SOLID WASTE**

FISCAL YEAR 2021 - 2022

A fee of \$115 per unit per year shall be imposed on the improved property of each owner (as of January 1 of the calendar year for which the fee is collected) within that benefits from the availability of the facility.

### Tipping fees:

Municipal Solid Waste	\$ 41.00	per ton
Construction & Demolition	\$ 32.00	per ton
Yard Waste	\$ 17.00	per ton
Pallets	\$ 32.00	per ton
Livestock	\$ 41.00	per ton
Asbestos	\$ 216.00	per ton



## TAX

	25.00 40.00
30 x 72	40 00
	10.00
36 x 96 \$	50.00
District Maps	
All 36" \$	25.00
Area Maps	
11 x 17 \$	10.00
18 x 24 \$	15.00
24 x 36 \$	20.00
36 x 48 \$	30.00
Large Capacity Hard Drive \$	50.00



### WATER AND SEWER

FISCAL YEAR 2021 - 2022

Table 1- Water Tap Fees and Meter Fees	Table 1-	Water	Tap Fees	and Meter I	Fees
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Meter Size	Taj	Fee	Met	ter Fee
3/4-inch	\$	960.00	\$	265.00
1-inch	\$	1,190.00	\$	355.00
2-inch	\$	2,840.00	\$	1,550.00
3/4-inch irrigation tap on service line	\$	480.00	\$	265.00
3/4-inch irrigation tap on water main	\$	960.00	\$	265.00
1-inch irrigation tap on water main	\$	1,190.00	\$	355.00

### Table 2-Capacity Development Fees for All Water Connections

Water Meter Size	Availability Fee
3/4-inch	\$ 3,102.00
1-inch	\$ 5,170.00
2-inch	\$ 16,544.00
3-inch	\$ 33,088.00
4-inch	\$ 51,699.00
6-inch	\$ 103,399.00
8-inch	\$ 165,438.00
10-inch	\$ 434,275.00
12-inch	\$ 548,014.00
Class of Service	Capacity Development Fee

lass of Service	Capacity Development Fee
Single Family Residential	\$ 3,102.00
Interruptible Agricultural	\$ 3,102.00
Commercial/Industrial	Meter Size Table 2
Single Family Residential Irrigation	\$ 3,102.00
All Other Irrigation	Meter Size Table 2

#### Notes

- 1) Capacity Development Fees must be fully paid before the issuance of the Building Permit for the property being served by the Planning and Inspections Department.
- 2) Any applicants under the Deferred Payment Plan will be subject to the Policy at the time of application.
- 3) For multi-family dwellings, a Capacity Development Fee shall be paid for each unit, regardless of the number of water taps or meters installed.
- 4) Applicants with multiple dwelling units, multiple unit businesses, or multiple buildings on an individual tract of land may apply for one Water Tap to serve all units. However, applicant shall pay Capacity Development Fees shown in Table 2, in addition to any applicable Tap Fees included in Table 1. All lines connecting more than one building to a single Water Tap will require a permit issued by the North Carolina Department of Environmental and Natural Resources.

Table 3-Monthly Volumetric Charges for Water		
Residential In-County Rates		
Minimum billing (0-2,500 gallons)	\$	23.37
Each additional 1,000 gallons up to 12,000 gallons	\$	5.51
Each additional 1,000 gallons over 12,000 gallons without drought restrictions	\$	6.68
Each additional 1,000 gallons over 12,000 gallons under voluntary restrictions	\$	8.36
Each additional 1,000 gallons over 12,000 gallons under mandatory restrictions	\$	13.38
Bulk Water Rate per 1,000 gallons	\$	9.35
Commercial In-County Rates	Ψ	7.55
Minimum billing (0-2,500 gallons)	\$	23.37
Each additional 1,000 gallons	\$	6.68
Interruptible Agricultural Rate per 1,000 gallons	\$	4.67
Bulk Water Rate per 1,000 gallons	\$	9.35
Industrial In-County Rates	Ψ	7.55
Minimum billing (0-2,500 gallons)	\$	23.37
Each additional 1,000 gallons	\$	5.51
Residential Out-of-County Rates	Ψ	3.31
Minimum billing (0-2,500 gallons)	\$	46.74
Each additional 1,000 gallons up to 12,000 gallons	\$	11.02
Each additional 1,000 gallons over 12,000 gallons without drought restrictions	\$	13.36
Each additional 1,000 gallons over 12,000 gallons under voluntary restrictions	\$	16.72
Each additional 1,000 gallons over 12,000 gallons under mandatory restrictions	\$	26.76
Bulk Water Rate per 1,000 gallons	\$	18.70
Commercial Out-of-County Rates	Ψ	10.70
Minimum billing (0-2,500 gallons)	\$	46.74
Each additional 1,000 gallons	\$	13.36
Interruptible Agricultural Rate per 1,000 gallons	\$	9.34
Bulk Water Rate per 1,000 gallons	\$	18.70
Industrial Out-of-County Rates	Ψ	10.70
Minimum billing (0-2,500 gallons)	\$	46.74
Each additional 1,000 gallons	\$	11.02
-	Ψ	11.02
Table 4-Sewer Tap Fees		
1 1\2-inch Low Pressure Sewer Tap	\$	3,000.00
2-inch Low Pressure Sewer Tap	\$	3,000.00
4-inch Gravity Sewer Tap	\$	3,000.00
6-inch Gravity Sewer Tap	\$	3,000.00
Table 5-Capacity Development Fees for All Sewer Connections		
Water Meter Size Availability Fee		
3/4-inch \$ 1,621.00		
1-inch \$ 2,702.00		
2-inch \$ 8,647.00		
3-inch \$ 17,295.00		
4-inch \$ 27,023.00		

6-inch	\$ 54,047.00
8-inch	\$ 86,647.00
10-inch	\$ 226,996.00
12-inch	\$ 286,447.00

### Notes

- 1) Capacity Development Fees must be fully paid before the issuance of the Building Permit for the property being served by the Planning and Inspections Department.
- 2) Any applicants under the Deferred Payment Plan will be subject to the Policy at the time of application.
- 3) For multi-family dwellings, a Capacity Development Fee shall be paid for each unit, regardless of the number of sewer taps or meters installed.
- 4) Applicants with multiple dwelling units, multiple unit businesses, or multiple buildings on an individual tract of land may apply for one Sewer Tap to serve all units. However, applicant shall pay Capacity Development Fees shown in Table 5, in addition to any applicable Tap Fees included in Table 4. All lines connecting more than one building to a single Sewer Tap will require a permit issued by the North Carolina Department of Environmental and Natural Resources.

### Table 6-Monthly Volumetric Charges for Sewer

Residential In-County Rates	
Minimum billing (0-2,500 gallons)	\$ 33.47
Each additional 1,000 gallons	\$ 7.90
Commercial In-County Rates	
Minimum billing (0-2,500 gallons)	\$ 33.47
Each additional 1,000 gallons	\$ 9.00
Industrial In-County Rates	
Minimum billing (0-2,500 gallons)	\$ 33.47
Each additional 1,000 gallons	\$ 9.00
Residential Out-of-County Rates	
Minimum billing (0-2,500 gallons)	\$ 66.93
Each additional 1,000 gallons	\$ 15.80
Commercial Out-of-County Rates	
Minimum billing (0-2,500 gallons)	\$ 66.93
Each additional 1,000 gallons	\$ 18.01
Industrial Out-of-County Rates	
Minimum billing (0-2,500 gallons)	\$ 66.93
Each additional 1,000 gallons	\$ 18.01
Sewer Only (non-metered flat rate)	\$ 53.20

### Table 7-Reimbursement Fees

The purpose of Table 7 fee structure is to reimburse for staff time and management for all Residential/Non-Residential Subdivision/Subdivision Technical Review Committee(STRC) Fees/Commercial/Industrial/Institutional Review and Inspections for new, existing, temporary use, and and building upfit, including pools. All applicable fees shall be paid in full at the time of submittal and/or scheduled inspection.

### Subdivision Review:

Subdivision Review (each submitted phase)	\$300.00 plus \$20.00 p	er lot
STRC Preliminary Review	\$ 30	00.00
Requested Hydrant Flow Test	\$ 10	00.00 each
Final Plat Review (each submitted phase)	\$	75.00 per review
Deed of Easement (each submitted phase)	\$ 10	00.00 per review

Note: Public Utilities Design Manual compliant submittals of more than three(3) re-review submittals shall be charged duplicate fees for each submittal thereafter.

### Commercial Review:

Commercial Plan Review Fee

Water	\$ 100.00
Sewer	\$ 100.00
Activity Center and/or Pool Review	\$ 75.00

Note: Commercial/Industrial/Institutional shall be charged for each submittal/re-review at the time of each submittal.

### Inspection:

Water Subdivision Inspection	\$125.00 plus \$20.00 per lo	Ī
Sewer Subdivision Inspection	\$125.00 plus \$20.00 per lo	Ī
Sewer Pump Station Inspection	\$ 350.00	per inspection
Commercial/Industrial/Institutional Inspection	\$ 150.00	per inspection
Non-scheduled Inspection	\$ 150.00	per inspection
Any item not otherwise addressed in this schedule that req	uires	
inspection, based upon Director's discretion	\$ 75.00	per inspection
Note: Inspection Fees are due prior to scheduling of inspection.		

### Penalties:

Wasted Trip/Re-Inspection Fee \$ 100.00 per trip

Note: To be used to prevent unnecessary trips to jobsite and to recoup money lost on wasted visits. Will be charged at time of a scheduled Wasted Trip/Re-Inspection with no further inspections conducted and/or scheduled until paid in full.

### Table 8-Miscellaneous Fees and Charges

New Account Activation Fee (applied to all new accounts)	\$	25.00
Renter Deposit	\$	75.00
Same Day Service Connection	\$	50.00
Default Fee	\$	50.00
After Hours Fee (lock list only)	\$	150.00
Late Payment Penalty (\$5.00 or 5%, whichever is higher)		\$5.00/5%
Meter Activation Fee (applied if inactivated/finaled within the		
previous 12 months by the same customer)	\$	200.00
Broken Lock Fee	\$	25.00

Broken Meter Box Ears Fee	\$	25.00
Tampering Fine		
First Offense	\$	100.00
Second Offense	\$	250.00
Third and Subsequent Offenses	\$	500.00
Civil Penalty (for irrigation violations during mandatory drought		
restrictions)	Φ.	<b>=</b> 0.00
First Offense	\$	50.00
Second Offense	\$	250.00
Third and Subsequent Offenses	\$	500.00
Residential Water Service:		
Relocate 3/4" or 1" Water Meter Box	\$	350.00
(Max. 10' either direction on Private Property)		
(Farther than 10' require a new Water Tap Fee based on size)		
(2" or larger services require a licensed Utility Contractor at		
Requestor's cost)		
Raise/Lower 3/4" or 1" Water Meter Box	\$	250.00
(2" or larger services require a licensed Utility Contractor at		
Requestor's cost)		
Repair/Replace 3/4" or 1" Water Meter Box	\$	250.00
(2" or larger services require a licensed Utility Contractor at		
Requestor's cost)		
Repair/Replace 3/4" or 1" Water/Irrigation Poly Box (only)	\$	75.00
Repair/Replace 3/4", 1", or 2" Meter Box Lid (only)	\$	50.00
Meter Test Fee, if no error found (3/4" or 1")	\$	75.00
(2" or larger meters require a licensed 3rd Party Tester at	·	
Requestor's cost)		
Meter Replacement Fee, if no malfunction	\$	265.00
Repair/Replace damaged 3/4", 1", or 2" Meter (only)	'	ed on size
(3" or larger meters require a licensed Utility Contractor at		
Requestor's cost)		
Water Service Fee (No Fault of Lincoln County)	\$	125.00
(Any requested service request/call that is determined to be no		120.00
Lincoln County equipment and/or appurtenances will be char		e)
Efficient County equipment and of apparenances will be char	ged tills re	,
Residential Sewer Service:		
Relocate 1.5" Low Pressure Sewer Service	\$	350.00
(Max. 10' either direction on Private Property)		
(Farther than 10' require a new Sewer Tap Fee based on size)		
(Larger services require a licensed Utility Contractor at		
Requestor's cost)		
Raise/Lower 1.5" Low Pressure Sewer Service Box	\$	250.00
(Larger services require a licensed Utility Contractor at		
Requestor's cost)		
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Repair/Replace 1.5" Low Pressure Sewer Service Box
(Larger services require a licensed Utility Contractor at
Requestor's cost)

Sewer Service Fee (No Fault of Lincoln County)
(Any requested service request/call that is determined to be no fault of
Lincoln County equipment and/or appurtenances will be charged this fee)

Non-Residential Request and/or Repairs require a licensed Utility Contractor at Requestor's cost.

Requestor's Cost: All other requests or emergency repairs to any Lincoln County equipment, structure, and/or Appurtenances, that are caused by any party, are charged on the Basis of Cost as determined by material used, equipment used, administrative burden, clean-up services, and any related contracted service costs required to complete the repair to the Public Utility Design Manual Requirements and Specifications.