



# Wilson County Government Fees

July 1, 2022

## Agriculture Center

Rental Fee of the Auditorium.....	\$500 (per day)
Deposit Fee .....	\$1000
Custodial Fee (covers set-up, take-down and clean-up).....	\$300

Rental fee payments are made by cash, check or money order and are required at the time of the event is reserved on the calendar and the application completed. The maximum capacity that the auditorium can hold is 300 people.

The deposit fee is due two weeks prior to the event. This will be refunded within two weeks following the event, if no damages are found to equipment, building or grounds and no evidence of alcoholic beverages.

## Development Services

Copy of the UDO Book.....	\$20.00
Copy charge .....	\$.05 (per page)

### PLANNING & ZONING FEE SCHEDULE

Zoning Certificate of Compliance Fee .....	\$25.00
Rezoning Application Fee .....	\$300.00 (less than 3 acres)
	\$500.00 (3-6 acres)
	\$1,000.00 (6+ acres)
Conditional District Rezoning Application Fee .....	\$325.00 (less than 3 acres)
	\$600.00 (3-6 acres)
	\$1,200.00 (6+ acres)
Special Use Permit Application Fee .....	\$250.00
Variance Application Fee .....	\$250.00





## FIRE PREVENTION INSPECTION FEES

A.	Alcohol Board of Control Licensing Inspection.....	\$75.00
B.	Assisted Living Facilities, Family Care Homes.....	\$75.00
C.	Day Care Centers.....	\$75.00
D.	Fireworks Display.....	\$125.00
E.	Foster Home.....	\$50.00
F.	Temporary Tent Permit.....	\$75.00
G.	Miscellaneous Fire Inspections not covered above.....	\$75.00

---

## RESIDENTIAL BUILDING PERMIT FEES

- A. For all one and two-family dwellings including site built and modular, additions, and alterations, the estimated construction cost shall be based on a rate of \$95.00 per square foot of habitable space. Attached carports, garages, decks, porches, and storage/utility rooms shall be estimated at \$30.00 per square foot.

DETACHED accessory buildings such as carports, garages, storage buildings and sheds shall be estimated at \$25.00 per square foot.

<b>CONSTRUCTION COST</b>	<b>FEE</b>
Up to \$5000.00	\$50.00
\$5001.00 to \$9999.99	\$75.00
\$10,000.00 to \$19,999.99	\$90.00
\$20,000.00 to \$29,999.99	\$100.00
\$30,000.00 to \$39,999.99	\$125.00
\$40,000.00 and above	\$3.00 per \$1000.00 or part thereof

B.	Manufactured (Mobile) Homes .....	Single Wide	\$100.00
		Double Wide	\$150.00
		Triple Wide	\$175.00

\*Trade permits per trade permit fee schedule.

C.	Demolition Permits .....	\$150.00
D.	Swimming Pools.....	\$100.00
E.	Miscellaneous permits not covered above .....	\$75.00

---

## RESIDENTIAL ELECTRICAL PERMIT FEES

A.	New Construction, Manufactured Homes, Services Changes:	
	Up to 200 amp.....	\$100.00
	400 amp .....	\$125.00
	Above 400 amp .....	\$125.00
		plus \$20 per 100 amp above 400 amp
B.	Additional wiring, alterations, & repairs NOT requiring service changes .....	\$75.00
C.	Generator and Transfer Switch Installations .....	\$100.00
D.	Solar Panel Installations .....	\$75.00 plus \$5.00 per Module (panel)
E.	Miscellaneous permits not covered above.....	\$75.00
F.	Re-Inspection Fee.....	\$75.00

---

**RESIDENTIAL MECHANICAL PERMIT FEES**

- A. NEW CONSTRUCTION, ADDITIONS, CHANGE OUTS: (includes duct and gas piping)
  - 1. Package Units.....\$75.00 per unit
  - 2. Split systems.....\$100.00 per system
  - 3. Multiple systems/units in same building .....\$125.00
- B. EXTENSION OR REPLACE DUCT ONLY .....\$50.00
- C. MANUFACTURED HOMES .....\$75.00
- D. GAS PIPING.....\$50.00  
(for other than new construction or if installed by other than same mechanical contractor)

**RESIDENTIAL PLUMBING PERMIT FEES**

- A. New Construction & Additions
  - Single Family & Each Unit of Duplex (up to 2 Bathrooms) .....\$100.00
  - Additional Bath .....\$15.00
- B. Single Bath Addition, Kitchen, Addition/Alteration, Laundry Addition, Water Heater Installations .....\$75.00
- C. Installation or Replacement of Water and/or Sewer Piping:
  - Water and Sewer.....\$75.00
  - Water Only .....\$50.00
  - Sewer Only.....\$50.00
- D. Miscellaneous Plumbing Work Not Covered Above .....\$75.00
- E. Manufactured Homes .....\$75.00

# Department of Social Services

**COUNTY FEES**

- Fee for Child Support Services for Non-Public Assistance Recipients.....\$25.00
- Fee for Employees for Replacement of ID Badges.....\$5.00
- Fee for NSF for Returned Checks.....\$25.00

**Sliding Fee Scale  
For Counseling**

**Client Name:**  
**Case Number:**

Annual Household Income in Dollars  
(Round gross to closest amount)

Number of People in the Home  
with Fee in Dollars

**For Individual Counseling**

**1      2      3      4      5**

9,000 and below	1	1	1	1	1
10,000 – 19,000	2	2	2	2	2
20,000 – 29,000	3	3	3	2	2
30,000 – 39,000	4	4	4	3	3



**ADOPTION FEE POLICY**  
**Preplacement Assessments**

**Who must pay a fee:**

1. Individuals or couples who are requesting an adoptive pre-placement assessment to adopt through an independent placement.
2. Individuals or couples who request an adoptive pre-placement assessment in order to adopt through a licensed adoption agency.

**Fee Exemptions**

- Prospective adoptive families in which the head of the household is WFFA (formerly AFDC) or SSI recipient
- Prospective adoptive families whose family income is below the State's established Income.
- Prospective adoptive families who have identified an adoptee who is in the custody and placement responsibility of a local department of social services and continues to pursue the adoption of an identified child.
- Prospective adoptive families who desire to adopt a special need's child as defined by NC Division of Social Services Family Services Manual, Vol, 1, Chapter IV.
- Prospective adoptive families who had begun the pre-placement assessment process before implementation of this policy.
- Wilson County Department of Social Services may exercise its option to reduce or waive the fee after verifying and documenting that the prospective adoptive family cannot pay the fee, or if any other reason exists that would result in the fee becoming a barrier to the adoption.

**Updated Preplacement Assessments**

N.C.G.S.48-3-301 requires that Pre-placement Assessment be current within 18 months immediately preceding placement of a minor. Wilson County Department of Social Services will charge an update fee to those families desiring to keep the pre-placement assessment current.

Policy outlined in Pre-Placement Assessments above will apply.

---

## Emergency Medical Services

**BLS Emergency** – BLS Emergency includes provision of medically necessary supplies and services as defined by the State. When transporting these patients, the ambulance must be staffed by an individual who is qualified in accordance with State and local laws as an EMT. BLS emergency is an immediate emergency response in which the ambulance provider/supplier begins as quickly as possible to take the steps necessary to respond to the call.

**BLS Emergency** services and transport by ground ambulance - .....\$525  
**BLS Emergency** Treat/No Transport - .....No Charge

**ALS1 Emergency** – Advanced Life Support, Level 1 (ALS1) Emergency includes provision of medically necessary supplies and services and the provision of an ALS assessment\* or at least one ALS Intervention.\*\* An ALS1 Emergency is an immediate emergency response in which the ambulance provider/supplier begins as quickly as possible to take the steps necessary to respond to the call.

**ALS1 Emergency** services and transport by ground ambulance.....\$625  
**ALS1 Emergency** Treat/No Transport.....\$100

**ALS2** – Advanced Life Support, Level 2 (ALS2) includes the provision of medically necessary supplies and services including: (1) at least three separate administrations of one or more medications by intravenous push/bolus or by continuous infusion (excluding crystalloid fluids), or (2) the provision of at least one of these ALS2 procedures: (a) Manual defibrillation/cardioversion, (b) Endotracheal intubation, (c) Central venous line, (d) Cardiac pacing, (e) Chest decompression, (f) Surgical airway, or (g) intraosseous line.

**ALS2** services and transport by ground ambulance .....\$925  
**ALS2** Treat/No Transport.....\$100

**ALS response with In-County EMS Provider** - .....No Charge

**Standby Charge** – ALS Unit/hr (3-hour minimum charge).....\$150

**Mileage** – Patient loaded miles.....\$12

\*ALS Assessment – assessment performed by an ALS crew as part of an emergency response that is necessary because the beneficiary’s reported condition at the time of dispatch indicates only an ALS crew is qualified to perform the assessment. An ALS assessment does not necessarily result in a determination that the beneficiary requires an ALS level of transport. In the case of an appropriately dispatched ALS emergency service, if the ALS crew completes an ALS assessment, the services provided by the ambulance transportation service provider or supplier are covered at the ALS emergency level, regardless of whether the beneficiary required ALS intervention services during the transport, provided the ambulance transportation itself was medically reasonable and necessary and all other coverage requirements are met.

\*\*Advanced Life Support (ALS) intervention - a procedure that, in accordance with State and local laws, is required to be done by an Advanced EMT or a Paramedic. Application: An ALS intervention must be medically necessary to qualify as an intervention for payment for an ALS level of service.

## GIS/Mapping Services

### Tax Maps

	8.5 x 11	Up to 11 x 17	Up to 17 x 22	Up to 22 x 34	Up to 34 x 44
No Aerial Photo	\$1	\$2	\$2	\$3	\$5
w/Aerial Photo	\$2	\$3	\$4	\$6	\$10

\*\*\* 34 x 44 (as allowed by stock paper supply)

### GIS Data

Data proved on CD .....\$25/CD

\*Note: Must fill out the Statement of Distribution Liability to request data.

### Custom Maps & Data

Maps (not already made) .....\$50/hour

Data Queries in Excel format (digital or printed).....\$50/hour



**\*Note: Price decreases if less than one hour**

**Copies**

Plats.....\$2/page  
 Deeds .....\$.50/page

# Health Department

NEW PATIENT			ESTABLISHED PATIENT		
CPT	Description	Fee	CPT	Description	Fee
99201	Office Visit, Level 1	90.00	99211	Office Visit, Level 1	45.00
99202	Office Visit, Level 2	152.00	99212	Office Visit, Level 2	88.00
99203	Office Visit, Level 3	221.00	99213	Office Visit, Level 3	149.00
99204	Office Visit, Level 4	343.00	99214	Office Visit, Level 4	233.00
99205	Office Visit, Level 5	432.00	99215	Office Visit, Level 5	302.00
NEW PATIENT PREVENTIVE			ESTABLISHED PATIENT PREVENTIVE		
CPT	Description	Fee	CPT	Description	Fee
99381	Office Visit <1	259.00	99391	Office Visit <1	226.00
99382	Office Visit 1-4 years	278.00	99392	Office Visit 1-4 years	246.00
99383	Office Visit 5-11 years	277.00	99393	Office Visit 5-11 years	245.00
99384	Office Visit 12-17 years	244.00	99394	Office Visit 12-17 years	212.00
99385	Office Visit 18-39 years	244.00	99395	Office Visit 18-39 years	213.00
99386	Office Visit 40-64	285.00	99396	Office Visit 40-64	232.00
99387	Office Visit 65+	337.00	99397	Office Visit 65+	290.00
CHILD HEALTH			COUNSELING/SCREENING		
CPT	Description	Fee	CPT	Description	Fee
94664	Nebulizer/Inhaler	36.00	99408	CRAFFT 15-30 mins	35.00
92551	Audiometer	15.00	99409	CRAFFT 30 min	65.00
51701	Catherization for Urine	95.00	99420	Health Risk Assessment	24.00
96110	Developmental Screening	20.00	99406	Tobacco Cessation <10m	20.00
69200	Foreign Body Removal (ear)	150.00	99407	Tobacco Cessation >10m	35.00
30300	Foreign Body Removal (nose)	250.00			
69210	Impacted Cerumen Removal	60.00	<b>DENTAL VARNISHING</b>		
96160	HEADSSS	8.00	CPT	Description	Fee
92587	Otacoustic Emission	55.00	D0145	Oral Evaluation	59.00
94760/ 94761	Pulse Oximetry (blood oxygen)	6.00	D1206	Fluoride Varnish	50.00
17250	Umbilical Cauterization	130.00			
99173	Vision	11.00			
94150/ S096	Vital Capacity Test/Peak	31.00			
69209	Removal impacted cerumen using irrigation	45.00			

FAMILY PLANNING SERVICES			MATERNITY		
CPT	Description	Fee	CPT	Description	Fee
J1050	Depo Provera (150 units)	58.50	59425	Antepartum Care 4-6	500.00
LU233	Family Planning Supplies	n/c	59426	Antepartum Care 7 or more	900.00
J7304	Contraceptive Patch	27.00	S0280	Pregnancy Risk Screening	50.00
J7300	IUD Paraguard	250.00	J3490	17-P	20.00
J7302	IUD Mirena	250.00	90384	Rho (d) Ig	127.00
58300	IUD Insertion	145.00	LU401	Prenatal Vitamins/Iron	n/c
58301	IUD Removal	175.00	LU284	ERRN MH Exam (report)	n/c
J7307	Nexplanon	414.00	96372	IM injection (17-p, Rhogam)	30.00
11981	Nexplanon Insertion	155.00	59430	Care after delivery	160.00
11982	Nexplanon Removal	180.00			
11983	Nexplanon Remove/Reinsert	260.00	<b>MEDICATIONS</b>		
J7303	Nuvaring	20.00	<b>CPT</b>	<b>Description</b>	<b>Fee</b>
S4993	Pills Given # ___ packs	13.00	J0570	Bicillin LA 2.4 million units	5.00
J8499	Plan B	8.00	J0696	Rocephin 250 mg	5.00
J7297	Levonorgestrel iu 52mg 3 yr	50.00	96372	IM injection (abx. B12)	30.00
J7298	Levonorgestrel iu 52mg 5 yr	230.00	J0133	STD Med Tx (herpes)	5.00
<b>NUTRITIONAL SERVICES</b>			<b>STD</b>		
<b>CPT</b>	<b>Description</b>	<b>Fee</b>	<b>CPT</b>	<b>Description</b>	<b>Fee</b>
G0108	DM Self-Mgmt; ind.-30 min	52.00	99211	STD Contact (bill)	45.00
C0109	DM Self-Mgmt; group-30 min	18.00	LU942	STD Contact (report)	n/c
97802	Nutri. Therapy, ind.-15 min	45.00			
97803	Nutri. Therapy, group-15 min	45.00	<b>TB</b>		
97804	Nutri. Therapy, 2 or more	20.00	<b>CPT</b>	<b>Description</b>	<b>Fee</b>
LU239	Nutritionist Contact	n/c	T1002	RN Services (15 mins)	25.00
			LU243	Comm Dis. Contact (report)	n/c
<b>OTHER SERVICES</b>			86580	PPD (low risk) private	30.00
<b>CPT</b>	<b>Description</b>	<b>Fee</b>	LU274	PPD given, contact	n/c
LU201	Repeat pap	n/c	LU114	PPD given, (HR-state) HIV	n/c
LU054	Immunization Record	n/c	LU263	PPD, negative, high risk	n/c
LU022	Immunization Review	8.00	LU120	PPD, negative, Low Risk	n/c
LU201	Repeat Pap (no charge)	n/c	LU264	PPD, not read, High risk	n/c
LU232	Test Results	n/c	LU124	PPD, not read, low risk	n/c
99173	Vision Screen (Adult)	11.00	LU117	PPD, positive, contact	n/c
LU208	Work/College Physical	50.00	LU262	PPD, positive, high risk	n/c
10060	Drainage of skin abscess	120.00	LU119	PPD, positive, low risk	n/c
17000	Destroy benign lesion	125.00	LU122	TB Obs. Preventative (DOPT)	n/c
17110	Destroy lesion, 1-14	200.00	LU121	TB Obs Therapy (DOT)	n/c
17111	Destroy lesion, 15 or more	130.00	LU102	TB Screening Form	20.00
93000	Electrocardiogram, complete	35.00			
93005	Electrocardiogram, tracing	20.00			
94150	Vital capacity testing	31.00			
94640	Airway inhalation treatment	25.00			

95115	Immunotherapy, 1 injection	20.00			
95117	Immunotherapy injections	30.00			
<b>VACCINES</b>			<b>ADMINISTRATION FEES</b>		
<b>CPT</b>	<b>Description</b>	<b>Fee</b>	<b>CPT</b>	<b>Description</b>	<b>Fee</b>
90702	DT	65.00	90471	Immunization admin fee	25.00
90700	DTaP	40.00	90472	Imm Admin #__ add'l	20.00
90723	DTaP, IPV, Hep B (Pediarix)	105.00	90473	Imm Adm Oral/Intranasal	20.00
90696	DTaP, IPV (Kinrix)	70.00	90474	Imm Adm Oral/Intranasal adc	20.00
90698	DTaP, IPV Hib (Pentacel)	95.00	G0008	Medicare Flu	25.00
90672	Flu Mist (LAIV4) 2-49 yrs	28.00	G0009	Medicare Pneumonia	25.00
90654	Flu Intradermal	35.00	G0010	Medicare Hep B	25.00
90685	Flue-PF 6-35 months	24.00			
90687	Flu-w/preservative 6 mos+	17.00	<b>STATE LAB</b>		
90686	Flu-PF 3 yrs +	22.00	<b>CPT</b>	<b>Description</b>	<b>Fee</b>
90688	Flu-w/preservative 3 yrs+	17.00	82105/ 82677	AFP	45.00
90662	Flu – High Dose	51.00	84702/ 6336	Serum Pregnancy Test	20.00
90633	Hep A (12 mos – 18 yrs)	55.00	87491/ 87591	CG Prob/Chlamydia Probe	n/c
90632	Hep A (19 yrs +)	85.00	87045	Enteric Stool	n/c
90636	Hep A/B (Twinrix) 19 yrs+	125.00	87340	Hepatitis	15.00
90744	Hep B (0-18 yrs)	35.00	87389	HIV	n/c
90746	Hep B (19 yrs +)	75.00	82139/ 82017	Newborn Screen	n/c
90648	Hib (ActHib)	21.00	86762	Rubella-MH	15.00
90647	Hib (Pedvax)	35.00	83020	Sickle Cell	15.00
90649	HPV (Gardasil)	170.00	86780	TPPS	n/c
90713	IPV (Polio)	45.00	87252	Viral Culture	24.00
90734	Meningococcal (Menactra)	155.00			
90707	MMR	95.00			
90710	MMRV (ProQuad)	260.00			
90670	PVC 13 (Prevnar)	240.00			
90732	Pneumococcal	125.00			
90675	Rabies (pre-exposure)	286.00			
90681	Rotavirus (Rotarix)	113.00			
90680	Rotavirus (RotaTeq)	105.00			
90714	Td (7 yrs+)	40.00			
90715	Tdap (7 yrs+)	60.00			
90716	Varicella	160.00			
90651	HPV vaccine, non-valent	265.00			
<b>LAB CORP</b>			<b>IN-HOUSE LABORATORY</b>		
<b>CPT</b>	<b>Description</b>	<b>Fee</b>	<b>CPT</b>	<b>Description</b>	<b>Fee</b>
86900	Blood Typing, ABO	10.00	82272	Fecal Occult Blood	12.00
86901	Blood Typing, Rh (D)	10.00	89060	Fern Test	20.00

86850	Antibody Screen	15.00	87081	GC Culture	20.00
85025	CBC w/Differential	15.00	82947	Glucose FBS/RBS (no id)	10.00
80053	Comp Metabolic Panel	15.00	82951	Glucose 1 hour (no id)	10.00
82570	Creatinine (24 hr urine)	10.00	82950	Glucose 2 hr PC (no id)	10.00
87149	Group B Strep	47.00	82951	GTT 3 hr (no id)	20.00
87081	GC Culture	20.00	85018	Hemoglobin	11.00
86677	H Pylori Antibodies	30.00	83655	Lead	32.00
84702	HCG Serum HCG Quant	20.00	87804	Rapid Flu	25.00
83036	Hemoglobin A1C	12.00	86703	Rapid HIV	20.00
86706	Hepatitis B Surface Antibodies	15.00	86308	Rapid Mono	15.00
86803	Hepatitis C Surface Antibodies	60.00	87880	Rapid Strep	25.00
80061	Lipid Panel	15.00	87807	Rapid RSV	20.00
80076	Liver Function (hepatic)	15.00	87205	Stat Mail Smear for GC	24.00
86765/86735/86762	Measles/Mumps/Rubella/Immunity	40.00	86592	Syphillis Serology (Qual)	10.00
82043	Micro Albumin (random urine)	10.00	86593	Syphillis Serology (Quan)	15.00
88175	Pap Smear	60.00	81025	Urine Pregnancy Test	25.00
84156	Protein (total urine)	10.00	87086	Urine Culture by Count	10.00
86762	Rubella Titer	15.00	81001	Urinalysis w/micro	13.00
86765	Rubeola Titer (Measles)	15.00	81003	Urinalysis w/o micro (dipstick)	11.00
84436/84479	Thyroid Panel w/TSH	15.00	82120	Vaginal Amine	8.00
84479	TSH	37.00	87210	Wet Mount	12.00
87077	Urine Culture	20.00	36416	Capillary Stick	5.00
86787	Varicella Titer	20.00	36415	Venipuncture	11.00
87070	Wound Culture – aerobic	25.00	99000	Handling Fee	10.00
87075	Wound Culture – anaerobic	25.00			

<b>ENVIRONMENTAL HEALTH SERVICES</b>			
<b>TYPE OF SERVICE</b>	<b>FEE</b>	<b>TYPE OF SERVICE</b>	<b>FEE</b>
<b>Food Service Plan Review</b>		<b>Water Samples</b>	
Food Service plan review	250.00	Bacteriological	75.00
Food Service plan review – mobile food unit	250.00	Full Well Panel	145.00
Temporary Food Establishment	75.00	Lead (w/3 follow up samples)	140.00
Limited Food Service	75.00	Pesticide	145.00
<b>Public Swimming Pool Fees</b>		Petroleum	145.00
Swimming Pool Plan Review	200.00	Nitrate/Nitrite	100.00
Pool Operation Permit	150.00	Inorganic Panel	140.00
Swimming Pool Reinspection	50.00		
<b>Tattoo</b>			
Tattoo Permit	150.00		
<b>On-Site Wastewater Fees</b>			
New Septic Evaluation	350.00		
Renew Expired Permit (no changes to site)	100.00		

Reuse Authorization of existing permit	100.00		
Existing System Compliance Inspection	65.00		
Engineered Option Fee	105.00		
Licensed Soil Scientist S.L.2020-3 (Coronavirus)	105.00		
License Soil Scientist S.L.2018-1114	350.00		
<b>On-Site Well Water Fees</b>			
New Well Permit	275.00		

Photocopy Charges		
Flat Rate	15.00	
Photocopy Fee (pages 1-25)	.75	
Photocopy Fee (pages 26+)	.50	

# Register of Deeds

## Recording Real Estate Instruments

- Instruments except deeds of trust & mortgages ..... \$26 first 15 pages, \$4 each additional page
- Deeds of trust & mortgages ..... \$64 (\$56) first 30 pages, \$4 each additional page
- Plats ..... \$21 each sheet
- Nonstandard document..... \$25
- Multiple instruments as one, each ..... \$10
- Satisfaction instruments ..... No fee
- Each additional index reference on Assignments ..... \$10

## UCC Records

- One or two pages in writing ..... \$38
- More than two pages in writing ..... \$45 up to 10 pages, \$2 ea. page over 10
- Filed electronically if permitted..... \$30
- Response to written request for information ..... \$38
- Response to electronic request if permitted..... \$30
- Copy of statement ..... \$2 each page

## Marriage Licenses

- Marriage License..... \$60
- Delayed marriage certificate, with one certified copy ..... \$20
- Application or license correction with one certified copy ..... \$10
- Marriage license certified copy ..... \$10

## Other Records

- Recording military discharge..... No Fee
- Military discharge certified copy as authorized ..... No Fee
- Birth certificate certified copy ..... \$10
- Birth certificate after one year or more for same country, with one certified copy ..... \$20
- Papers for birth certificate in another county one year or more after birth ..... \$10
- Birth certificate for papers from another county one year or more after birth, with one certified copy..... \$10
- Death Certificate certified copy ..... \$10
- Birth record amendment..... \$10
- Death record amendment ..... \$10
- Legitimations ..... \$10

- Certified copies unless statute otherwise provides .....\$5 first page, \$2 each additional page
- Uncertified copies..... Cost as posted

**Other Services**

- Notary public oath ..... \$10
- Comparing copy for certification ..... \$5
- State vital records search..... \$14
- State vital records for network access .....\$24 first copy, \$15 each additional copy
- Miscellaneous services ..... Cost as posted

## Sheriff's Office

Arrest Bracelet Monitoring Fee .....		\$90.00 (set up)
Detention Center SMCP Fee .....		\$40.00 (per day for each inmate)
Pet Privilege/Licensing Fee .....	Altered	Unaltered
Cat/Dog under 1 yr (1 yr license)	\$10.00	\$10.00
Cat/Dog 1 yr or older (1 yr license)	\$10.00	\$20.00
Cat/Dog 1 yr or older (3 yr license)	\$25.00	\$50.00
Adoption Fee .....		\$25.00
Carry Concealed Weapon (New Permits).....		\$90.00
Carry Concealed Weapon (Renewals) .....		\$75.00
Gun Permit Fee .....		\$5.00 (\$5.00 for each additional permit at the time of purchase)
Fingerprint Fee .....		\$10.00
Civil Process Fee .....		\$30.00

## Solid Waste Services

Asbestos.....	\$100.00/ton
C&D (Construction & Demolition) .....	\$42.00/ton*
LCID (Land Clearing & Inert Debris) .....	\$18.00/ton
MSW (Mixed Solid Waste) .....	\$55.00/ton
YW (Yard Waste) .....	\$22.00/ton
Commingled Recycling .....	Current Market Rate + \$14.00/ton
Tires .....	\$74.82/ton

**Solid Waste District Residents**

Household Fee .....\$45.00/house (convenience center use)

Solid Waste District Tax ..... \$.0325/\$100

\*\* Includes \$2.00 per ton solid waste tax imposed by State of North Carolina

# Water Services

## SOUTHWEST & SOUTHEAST

Application Fee .....	\$20
Late.....	\$10
Non-payment Fee .....	\$50
NSF Fee .....	\$25
Meter Deposit .....	\$150
¾ Tap Fee .....	\$1,200 (\$150-meter fee)
1" Tap Fee .....	\$1,500 (\$150-meter fee)
2" Tap Fee .....	\$2,900 (subject to price value)
Dormant Tap Fee.....	\$500 (\$150-meter fee)
Tamper Fee .....	\$300 (Residential)
Tamper Fee .....	\$500 (Commercial)
Broken Lock.....	\$10
Recheck meter fee.....	\$25
Test meter fee.....	\$25
Broken Angle Stop .....	\$45
Development Fee.....	\$150 per lot

### Monthly Usage Fees for Residential and Commercial

<i>Water Usage (Gallons)</i>	<i>Water Usage fee</i>
Base	\$32.00
First 3,000 gallons	\$5.00 per thousand
Next 3,000 gallons	\$7.00 per thousand
Next 3,000 gallons	\$8.00 per thousand
Next 3,000 gallons	\$9.00 per thousand