

Application for Building Permit

Applicant: Fill in all applicable areas; please print clearly.

Application Number _____

Intake Person (office use only) _____

Applicant is: Owner Contractor Architect/Designer Agent:

Project Identification:

APN: _____ Lot #: _____ Suite or Space #: _____

Job Address: _____ City: _____

State: _____ Zip: _____

Project Type (check appropriate item)

Commercial Residential

Permit Type(s) (check appropriate items)

BLDG MECH PLUMB ELEC

Scope of Work _____

Valuation: \$ _____ Const. Type: _____ Occupancy: _____

Is Bldg. Sprinklered? Yes No Existing Use: _____ Remodel Sq. Ftg. _____

Proposed Use _____ # of Stories: _____ # of Units: _____

Comm. Sq. Ftg. Office: _____ Retail: _____ Warehouse: _____ Other: _____

New Res. Sq. Ftg. _____ Total Sq. Ftg. _____ Dwelling: _____ Garage Sq. Ftg. _____ Patio: _____ Porch: _____ Deck: _____

Are you removing a street tree? Yes No Are you doing any work in the public right of way? Yes No

Owner's Name, Address, Phone

Name _____ Home Phone: _____

Address _____ Bus. Phone: _____

Email _____ City _____ State _____ Zip Code _____

Contractor's Name, Address, Phone & Contractor's Lic. #

Check Here if "Owner/Builder" Permit

Company Name _____

Bus Phone: _____

Contact Name _____

Cell Phone: _____

Address _____

Cell. Phone: _____

Email _____ City _____ State _____ Zip Code _____

License #: _____ License Classifications(s): _____

Architect Designer Engineer (please check one)

Name _____ Phone: _____

Address _____ Bus. Phone: _____

Email _____ City _____ State _____ Zip Code _____

Desired contact person: Owner Contractor Architect/Designer Agent

Applicant Signature _____

Printed Name _____

Date _____