

For Office Use Only	
Application Date:	
Permit Number:	
Date Issued:	



COMMERCIAL OR MULTI- FAMILY BUILDING PERMIT APPLICATION

Project Address: _____

Property Owner: _____ Owner Cell: _____

Contractor Name: _____

Contractor Address: _____ Contractor Phone: _____

Contractor Email: _____

Site Contact Name: _____ Site Contact Cell: _____

Please check all that apply:

NEW CONSTRUCTION		REMODEL		ADDITION	
DRIVEWAY		ROOF		FENCE	
SIGN		DEMOLITION		DRAINAGE	
FIRE ALARM		FIRE SPRINKLER		SWIMMING POOL	
OTHER (EXPLAIN)					
MISCELLANEOUS (EXPLAIN)					

Description of Work: _____

Valuation of Work: _____ Lot Coverage %: _____

Special Conditions: _____

NOTE: All sub-contractors (electrical, mechanical/HVAC, plumbing, low voltage, sign etc.) are required to pull separate permits. All permits become null and void if work or construction authorized is not commenced within six months, or if construction or work is suspended or abandoned for a period of six months at any time after work is started.

I hereby certify that I have read and examined this application and know the same to be true and correct. I understand that all provisions of state laws and city ordinances governing this type of work will be complied with whether specified herein or not. I further understand that the issuance of a permit does not grant the authority to violate or cancel the provisions of any state or local laws regulating construction or the performance of construction.

Applicant's Signature

Date

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Required Inspections:

Pre construction	_____	Foundation	_____	Sheathing	_____	C OF O	_____
Lath/Brick ties	_____	Framing/Fire Place	_____	Driveway	_____		
Cover	_____	Windstrap	_____	Final	_____		

Permit Fee: _____ Plan Review Fee: _____ Total: _____

Plans approved for issuance by: _____

Building Official and/or Representative Signature:

Date: