

BUILDING PERMIT APPLICATION

Date:	_____
Permit #:	_____
Permit Exp:	_____
<i>For Office Use Only</i>	

Job Address: _____

Property Owner/Tenant Name: _____

Contractor: _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Phone Number: _____ **Email:** _____

COMMERCIAL

RESIDENTIAL

- | | |
|--|--------------------------------|
| <input type="checkbox"/> New Construction | <input type="checkbox"/> Fence |
| <input type="checkbox"/> Additions/Alterations/Repairs | <input type="checkbox"/> Sign |
| <input type="checkbox"/> Accessory Buildings (Storage Bldgs., Detached Garage, Carports, etc.) | <input type="checkbox"/> Pool |
| <input type="checkbox"/> Drive Approaches/Driveways | <input type="checkbox"/> Other |

Description of Work _____

Total Square Footage _____ **Estimated Valuation of Project:** \$ _____

Permit Fee: _____ **Plan Review Fee:** _____ **Total Fee Due:** _____

Minimum submittal requirements for new Residential construction:
(2 sets of each listed below)

- Site Plans
- Foundation Plans (Engineered Design)
- Elevations (for all four walls)
- Floor Plans
- Energy Code Compliance Documents

Minimum submittal requirements for new Commercial construction:
(3 sets of each listed below)

- Site Plans
- Foundation Plans
- Structural Plans
- Architectural Plans
- Mechanical Plans
- Energy Code Compliance Documents
- Electrical System Plans
- Plumbing System Plans
- Landscape Plans
- Irrigation Plans

All construction documents and plans must be signed and sealed by a professional registered designer.

I have read the completed application and know the same is true and correct and hereby agree that if a permit is issued all provisions of the City Ordinances and State laws will be complied with whether herein specified or not. I agree to comply with all property restrictions. I am the owner of the property or the duly authorized agent.

Permission is hereby granted to enter the premises and make all inspections.

• I am aware that a re-inspection fee shall apply for a no show or a red tag

Applicant Signature: _____ **Date:** _____

For Office Use Only:

Date Approved: _____ **Date Issued:** _____ **Init:** _____ **Total Paid:** _____