

BUILDING PERMIT APPLICATION

Permit No.		Receipt No.		Permit Fee		Date Permit Issued		Issued By		
				\$		Month	Day	Year		
LOCATION OF IMPROVEMENT										
Address – Street No.				Street Name						
City				Zip			Map #	Sub block	Block	Parcel #

NAME	MAILING ADDRESS	ZIP CODE	TELEPHONE	LICENSE NO
OWNER				
ARCHITECT				
GEN. CONT.				

SELECTED CHARACTERISTICS OF WORK

NATURE OF WORK	IF RESIDENTIAL	UNITS	DESCRIPTION OF WORK
<input type="checkbox"/> 1. New Building	<input type="checkbox"/> 1. One Family	1	
<input type="checkbox"/> 2. Addition	<input type="checkbox"/> 2. Duplex	2	
<input type="checkbox"/> 3. Alteration	<input type="checkbox"/> 3. Apartment		
<input type="checkbox"/> 4. Repair/Replacement	<input type="checkbox"/> 4. Condominium		
<input type="checkbox"/> 5. Demolition	<input type="checkbox"/> 5. Dorm/ Rooming House		
<input type="checkbox"/> 6. Moving/Relocation	<input type="checkbox"/> 6. Other (Specify)		
<input type="checkbox"/> 7. Foundation Only			

TYPE OF OCCURRENCE	PRINCIPAL TYPE OF FRAME
<input type="checkbox"/> 1. Assembly	<input type="checkbox"/> Type 1 – Fireproof
<input type="checkbox"/> 2. Business	<input type="checkbox"/> Type 2 – Fire Resistant
<input type="checkbox"/> 3. Educational	<input type="checkbox"/> Type 3 – Heavy Timber
<input type="checkbox"/> 4. Hazardous	<input type="checkbox"/> Type 4 – Non-Combustible
<input type="checkbox"/> 5. Factory – Industrial	<input type="checkbox"/> Type 5 – Ordinary Construction
<input type="checkbox"/> 6. Institutional	<input type="checkbox"/> Type 6 – Wood Frame
<input type="checkbox"/> 7. Mercantile	
<input type="checkbox"/> 8. Residential	
<input type="checkbox"/> 9. Storage	

SOURCE OF WATER SUPPLY SOURCE OF SEWAGE DISPOSAL

TYPE OF WORK	VALUE	CONTRACTOR
Building		
Electrical		
Plumbing		
Heating		
Air Conditioning		
Other (Excluding Land)		
TOTAL		

FLOOD PLAIN DATA – COMPLETE ONLY IF SITE WITHIN 100 YEAR FLOOD PLAIN

Zone _____ Elevation of 100 Year Flood _____ Feet First Floor Elevation Above Sea Level _____ Feet

Zoning Approval	Subdivision Approval	Storm Drainage Approval

AFFIDAVIT OF APPLICANT

- No work will be started before permit card is posted or continued if the permit card is destroyed, lost or stolen.
- No work is to be continued if permit card is destroyed, lost or stolen.
- Contractor and subcontractors will secure (if required) a business license before beginning any work.
- This permit is void if job is not started within 6 months of application date.
- I will be responsible and will pay for the business license of any contractor or subcontractor doing work on this project if found without a license.
- The undersigned owner or agent understands that the approval of this application does not constitute a privilege to violate any applicable governmental ordinances, codes, or laws, and that any omission of or misrepresentation of fact with or without intention of the undersigned or any alteration or change from this application without approval of the Building Official, shall constitute sufficient ground for the revocation of any permit issued which was based on the approval of this application. This permit does not authorize any encroachment upon public property.

Signature of Applicant

Date

Address