

APPLICATION FOR PLAN EXAMINATION AND BUILDING PERMIT



OFFICE USE ONLY:

DATE SUBMITTED: _____ PERMIT NO: _____

Type of Permit:

<input type="checkbox"/> Building (BP)	<input type="checkbox"/> Electrical (EL)	<input type="checkbox"/> Mechanical (MC)	<input type="checkbox"/> Plumbing (PL)	<input type="checkbox"/> Driveway (DW)
<input type="checkbox"/> Demolition (DM)	<input type="checkbox"/> Sign (SG)	<input type="checkbox"/> Fence (FC)	<input type="checkbox"/> Excavation (EX)	

Property Information

Street Address No.: _____ Street Name: _____
 Subdivision: _____ Block: _____ Lot: _____

Applicant Information

Applicant: Owner Contractor Other
 Applicant Full Name or Company Name: _____
 Address: _____ City/State/Zip: _____
 Phone: _____ Email: _____ Cell: _____

Owner Information

Owner Full Name or Company Name: _____
 Address: _____
 City/State/Zip: _____
 Phone: _____ Cell: _____ Email: _____

Utility Billing Information *(for new construction and remodels)*

Utility Account in Name of: _____
 Address: _____
 City/State/Zip: _____
 Phone: _____ Cell: _____ Email: _____

Contractor Information:

Contractor Number	Type of Contractor	Company Name	Phone
Architect/Engineer/Designer			
Primary Contractor			
Sub Contractors			
	Excavating		
	Concrete Found.		
	Concrete Flatwork		
	Framing		
	Plumbing		
	Electrical		
	HVAC		
	Roofing		
	Masonry		
	Siding		
	Painting		
	Drywall		
	Guttering		
	Landscaping		

**** (REQUIRED) ** Project Description:** _____

**** (REQUIRED) ** Total Estimated Value of Work: \$** _____

Size of Structure: _____ Length; _____ Width
 No. of dwelling units: _____
 Construction Purpose/Type: New Construction Addition Remodel
 Repair/Replacement Demolition Relocation

ELECTRICAL INFORMATION

PROJECT DESCRIPTION: _____

MECHANICAL INFORMATION

PROJECT DESCRIPTION: _____

PLUMBING INFORMATION

PROJECT DESCRIPTION: _____

DEMOLITION INFORMATION

Description of structure to be demolished: _____
 Spoils Trucked To: _____

SIGN INFORMATION

Sign Type: Permanent / Temporary Sign Style: Freestanding / Attached
 No. of freestanding signs: _____ proposed; _____ existing on
 lot No. of attached signs: _____ proposed; _____ existing on lot
 Sq. footage of each sign: _____
 Attach drawing of each proposed sign face

FENCE INFORMATION

Type of Fence: _____ Height of Fence: _____
 Total Length of Fence: _____ Corner Lot: YES NO
 Fence Location: Front Yard Back Yard Property Pins currently located: YES NO

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter area covered by such permit at any reasonable hour to enforce the provisions of the code(s).

 SIGNATURE OF APPLICANT ADDRESS PHONE NUMBER

Prior to start of new construction the location of utilities and service taps should be located and physically verified on site.

No electric or water meters for new construction will be set until the utility customer for this location has signed up in the City Collector's Office (1st floor of City Hall) for a utility account for this address.

TEMPORARY ELECTRIC METERS SHALL NOT BE MOVED TO ANOTHER LOCATION!