

# APPLICATION FOR PLAN EXAMINATION AND BUILDING PERMIT



*OFFICE USE ONLY:*  
PTWIN32 ASSIGNED PERMIT NO:  
\_\_\_\_\_

<b>Type of Permit:</b>				
<input type="checkbox"/> <b>Building (BP)</b>	<input type="checkbox"/> <b>Electrical (EL)</b>	<input type="checkbox"/> <b>Mechanical (MC)</b>	<input type="checkbox"/> <b>Plumbing (PL)</b>	<input type="checkbox"/> <b>Driveway (DW)</b>
<input type="checkbox"/> <b>Demolition (DM)</b>	<input type="checkbox"/> <b>Sign (SG)</b>	<input type="checkbox"/> <b>Fence (FC)</b>		

**Application Information**

Application Date: \_\_\_\_\_

Applicant:     Owner     Contractor     Other

Applicant Full Name or Company Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Cell: \_\_\_\_\_

**Property Information**

Street Address No.: \_\_\_\_\_ Street Name: \_\_\_\_\_

Subdivision: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_

Lot Size: \_\_\_\_\_

**Owner Information**

Owner Full Name or Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: Day: \_\_\_\_\_ Evening: \_\_\_\_\_ Fax: \_\_\_\_\_ Cell: \_\_\_\_\_

**Contractor Information:**

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

**\*\* (REQUIRED) \*\*** Project Description: \_\_\_\_\_  
 \_\_\_\_\_

**Total Estimated Value of Work: \$** \_\_\_\_\_

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

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**ELECTRICAL INFORMATION**

PROJECT DESCRIPTION: \_\_\_\_\_  
 \_\_\_\_\_

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**MECHANICAL INFORMATION**

PROJECT DESCRIPTION: \_\_\_\_\_  
 \_\_\_\_\_

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**PLUMBING INFORMATION**

PROJECT DESCRIPTION: \_\_\_\_\_  
 \_\_\_\_\_

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**DEMOLITION INFORMATION**

Description of structure to be demolished: \_\_\_\_\_  
 Spoils Trucked To: \_\_\_\_\_

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**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: \_\_\_\_\_  
 Wording on each sign: \_\_\_\_\_

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**FENCE INFORMATION**

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

**\*\*\*\*Window Schedule and Site Plan must be attached\*\*\*\***

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

\*Revised 9-20-06 JW