

Ιf	Value of	Construction	is	over	\$50,	000
Т	DIR Num	nher is				

BUILDING/POOL PERMIT APPLICATION

(See Building Permit Plan Review Checklist to verify all items in the checklist are included)

Date:	·	·						
Address of Project:								
Name of Business:		Zoning:						
Name of Subdivision:	Lot:	Block:						
Description of the Project:	Value of	Value of Construction:						
Total Square Feet: (Living A	rea): (Garage):	Height:						
Applicant :		Phone:						
Applicant's Complete Address:		FAX: Email:						
Property Owner:		Phone:						
Property Owner's Complete Address:		FAX:						
General Contractor or Project Manager:								
General Contractor's or Project Manager's Complete Address:								
General Contractor's or Project Manager's Phone: E-mail:								
State Contractor Registration Number: (for new single family home, material improve	ement, or re-model over \$20,000)							
Plumbing Contractor: (if applicable)		Gas? YES N	10					
Mechanical Contractor: (if applicable)								
Electrical Contractor: (if applicable)								
As per ICC Codes Occupancy Type:	Construction Type:							
Site Plan Attached? YES NO	Construction Plans Attac	hed? YES NO						
Asbestos Disclosure Statement Signed & Attached? YES NO								

NOTICE TO APPLICANT:

This permit becomes null and void if work or construction authorized is not commenced within 180 days; or if construction or work is suspended or abandoned for a period of 180 days at any time after work is commenced.

I have carefully read the complete application and know the same is true and correct. I understand the ordinances governing the construction activity described in this application, and agree to comply with all provisions of the City ordinances, State laws, and all property restrictions, whether herein specified or not. As the owner of the above property or a duly authorized agent, I hereby grant permission to enter the premises and make all necessary inspections.



(Owner or Authorized Agent)