

# Building Permit Application

Permit no.	Receipt No.	Permit Fee	Date Permit Issued	Issued By
		\$	Day _____ Mo. _____ Year _____	

**LOCATION OF IMPROVEMENT**

Address -- Street No \_\_\_\_\_ Street Name \_\_\_\_\_ Street Type \_\_\_\_\_

City	County	Zip Code	School District	Fire District	Census Tract	Tax District
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TAX MAP			SUBDIVISION			
Page	Block	Lot	Name	Section	Block	Lot

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

**SELECTED CHARACTERISTICS OF WORK**

<p><b>NATURE OF WORK</b></p> <input type="checkbox"/> 1. New Building <input type="checkbox"/> 2. Addition <input type="checkbox"/> 3. Alteration <input type="checkbox"/> 4. Repair/Replacement <input type="checkbox"/> 5. Demolition <input type="checkbox"/> 6. Moving/Relocation <input type="checkbox"/> 7. Foundation Only	<p><b>DIMENSIONS</b></p> <p>1. Number of Floors _____</p> <p>2. Total Floor Area of New Construction Based on Exterior Dimensions _____ Sq. Ft.</p> <p>Heated _____</p> <p>Basement _____</p> <p>Accessory Structures _____</p> <p>3. Land Area _____ Sq. Ft.</p>	<p><b>DESCRIPTION OF WORK</b></p>
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**OWNERSHIP**

 1. Private (Individual, Corporation, Other)  
 2. Public (Federal, State, Local Gov'ts., Other)

**ESTIMATED DATE OF COMPLETION** 19\_\_

PROPOSED USE (IF DEMOLITION INDICATE MOST RECENT USE)		OFF STREET PARKING
<p><b>TYPE OF OCCURRENCE</b></p> <input type="checkbox"/> 1. Assembly <input type="checkbox"/> 2. Business <input type="checkbox"/> 3. Educational <input type="checkbox"/> 4. Hazardous <input type="checkbox"/> 5. Factory -- Industrial <input type="checkbox"/> 6. Institutional <input type="checkbox"/> 7. Mercantile <input type="checkbox"/> 8. Residential <input type="checkbox"/> 9. Storage	<p><b>IF RESIDENTIAL</b></p> <p><b>UNITS</b></p> <input type="checkbox"/> 1. One Family _____ 1 <input type="checkbox"/> 2. Mobile Home _____ 1 <input type="checkbox"/> 3. Duplex _____ 2 <input type="checkbox"/> 4. Apartment _____ <input type="checkbox"/> 5. Condominium _____ <input type="checkbox"/> 6. Dorm/ Rooming House _____ <input type="checkbox"/> 7. Other (Specify) _____ If Conversion, Explain _____	<input type="checkbox"/> 1. Indoor Number _____ <input type="checkbox"/> 2. Outdoor Number _____ 3. Total _____

<p><b>PRINCIPAL TYPE OF FRAME</b></p> <input type="checkbox"/> Type 1 - Fireproof <input type="checkbox"/> Type 2 - Fire Resistant <input type="checkbox"/> Type 3 - Heavy Timber <input type="checkbox"/> Type 4 - Non-Combustible <input type="checkbox"/> Type 5 - Ordinary Construction <input type="checkbox"/> Type 6 - Wood Frame	<p><b>PRINCIPAL HEATING FUEL</b></p> <input type="checkbox"/> 1. Gas <input type="checkbox"/> 2. Oil <input type="checkbox"/> 3. Electricity <input type="checkbox"/> 4. Coal <input type="checkbox"/> 5. Wood <input type="checkbox"/> 6. Other (Specify) _____	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>TYPE OF WORK</th> <th>VALUE</th> <th>CONTRACTOR</th> </tr> </thead> <tbody> <tr><td>Building</td><td></td><td></td></tr> <tr><td>Electrical</td><td></td><td></td></tr> <tr><td>Plumbing</td><td></td><td></td></tr> <tr><td>Heating</td><td></td><td></td></tr> <tr><td>Air Conditioning</td><td></td><td></td></tr> <tr><td>Other</td><td></td><td></td></tr> <tr><td>(Excluding Land)</td><td></td><td></td></tr> <tr><td><b>TOTAL</b></td><td></td><td></td></tr> </tbody> </table>	TYPE OF WORK	VALUE	CONTRACTOR	Building			Electrical			Plumbing			Heating			Air Conditioning			Other			(Excluding Land)			<b>TOTAL</b>		
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**SOURCE OF WATER SUPPLY**

**SOURCE OF SEWAGE DISPOSAL (Permit No.)**

**FLOOD PLAIN DATA — COMPLETE ONLY IF SITE WITHIN 100 YEAR FLOOD PLAIN**

Elevation of 100 Year Flood \_\_\_\_\_ Feet    First Floor Elevation Above Mean 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 \_\_\_\_\_