



Permit#: \_\_\_\_\_

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

# BUILDING PERMIT APPLICATION

**BUILDING PROGRAM**



Job Site Address: \_\_\_\_\_

Property Owner's Name: \_\_\_\_\_ Email: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Valuation \$: \_\_\_\_\_

Job Description: \_\_\_\_\_

Project Includes:  Electrical  Plumbing  Mechanical  Demolition of Entire Structure

Applicant's Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Architect: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Engineer: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Responsible Party:  Contractor  Owner/Builder  TBD

Contractor's Business Name: \_\_\_\_\_ Lic. No: \_\_\_\_\_

License Class: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Worker's Comp. Exempt?  Yes  No

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Worker's Comp Carrier: \_\_\_\_\_ Policy No: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_

*Please complete both pages of this application.*

Type of Construction: \_\_\_\_\_ Occupancy Classification: \_\_\_\_\_

Existing Fire Sprinklers:  Yes  No

Pre-Approved Garden Cottage ADU:  Yes  No

Have modifications been made to the pre-approved plans?  Yes  No

PV System:  Roof Mounted or  Ground Mounted STC Rating \_\_\_\_\_ kW DC  
 New Main Panel: \_\_\_\_\_ (e.g. 100A)  New Subpanel(s): \_\_\_\_\_ (e.g. 125A, 200A)  
 New Batteries: \_\_\_\_\_ QTY (e.g. 3 batteries) Distance apart \_\_\_\_\_ inches

Residential  Non-Residential

New Building  Addition  Misc. Repair  Fire Repair  
 Termite/Decay Repair  Demolish  Tenant Improvement  
 Water Damage Repair  Remodel  Other: \_\_\_\_\_

**Description of Building:**

Single Family  Duplex/Townhouse  Condominium  Office/Professional  
 Apartment  Restaurant  Historical  Medical  Church  
 Retail  Accessory Bldg.  Other: \_\_\_\_\_  
 Accessory Dwelling Unit

**Residential Addition/New Construction:**

Conditioned Area ..... s.f.  
 Garage ..... s.f.  
 Deck/Balcony/Arbor/Covered Porch ..... s.f.  
 Other New ..... s.f.

**Landscaping:**

New ..... s.f.  
 Replacement ..... s.f.

**Residential Remodel:**

Kit/Laundry/Bath .....  
    w/ framing ..... s.f.  
    w/o framing ..... s.f.  
 Garage Remodel ..... s.f.  
 Living/Bedroom/Other ..... s.f.  
 Deck/Balcony/Covered Porch ..... s.f.

**Retaining Walls:**

Linear Feet ..... l.f.  
 Max Height .....

**Commercial:**

New Construction/Addition ..... s.f.  
 T.I. .... s.f.  
 Other ..... s.f.