



APPLICATION FOR PLAN EXAMINATION AND BUILDING PERMIT

APPLICANT INSTRUCTIONS: For all applications, complete Parts 1, 2, 3, 4 and 5 of this form. If electrical work, also complete Part 6. If plumbing work, complete also Part 7. If mechanical work, complete also Part 8. For other permits, complete also Part 9. Site Plan (Part 10) is to be shown on Page 4 or attached hereto.

App. Date:	Type Permit <input type="checkbox"/> Building <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> Mechanical <input type="checkbox"/> Other <input type="checkbox"/>	Owner Applicant? Y <input type="checkbox"/> N <input type="checkbox"/>
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PROPERTY INFORMATION

Street Address	Apt.	Zip	Parcel Number
Subdivision	Lot Number	Parcel Type	<input type="checkbox"/> Residential <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Other

Owner Information

First Name	Last Name or Business Name & EMAIL ADDRESS		
Street Address	City	State	Zip
Phone Number	Cell Phone	Fax No.	

CONTRACTORS INFORMATION

	Contractor Name	Email Address	City	State	Zip
Applicant (not owner)					
Architect / Engineer					
General Contractor					
Excavation					
Concrete					
Carpentry					
Electrical					
Plumbing					
Sewer					
Mechanical					
Roofing					
Masonry					
Drywall or Lathing					
Insulation					
Paving					
Fire Sprinkler					

CERTIFICATION

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 areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

Signature of Applicant	Email	Phone No.
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Responsible Person in Charge of Work & Email	Phone No.
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Plumbing Permit Application					Plumbing Work Y <input type="checkbox"/> N <input type="checkbox"/>
Enter the Number of Fixtures Being Installed, Replaced or Repaired					
Tubs / Showers		Drinking Fountains		Back Flow Preventers	
Shower Stalls		Floor Drains		Water Pumps	
Lavatories		Water Heaters		Roof Openings	
Toilets		Water Softeners		Parking Lot Drains	
Urinals		Sewage Ejectors		Inside Downspouts	
Sinks		Sump Pumps		Swimming Pools	
Laundry Tubs		Grease Traps		Standpipes (Number of Heads)	
Dishwashers		Bidets		Fire Sprinklers (Number of Heads)	
Garbage Disposals				Lawn Sprinklers (Number of Heads)	
				Total Fixtures	
Public Water			Public Sewer		
Water Service Size		Water Meter Size		Average Daily Water Use (GPD)	
Utility Service Revisions:					
Est. Start		Est. Finish			

Number of Bedrooms:					
Mechanical Permit Application			Mechanical Work Y N		
Enter the Number of New or Replacements Units					
Forced Air Furnace		Incinerator		Air Handling Unit	
Unit Heater		Boiler		Heat Pump	
Gas / Oil Conversion		Coil Unit		Air Cleaner	
Space Heater		Window A/C Unit		Kitchen Exhaust Hood	
Gravity Furnace		Split System A/C		Kitchen Exhaust Hood	
Solid Fuel Appliance		A/C Comptessor		Electric Furnace	

Type of Heat (check one)					
Gas	<input type="checkbox"/>	Oil	<input type="checkbox"/>	Electric	<input type="checkbox"/>
Wood	<input type="checkbox"/>	Other	<input type="checkbox"/>		<input type="checkbox"/>
Est. Start		Est. Finish			

Other Permit Items	
Permit Type:	
Separate items(i.e. patio or deck):	
Est. Start	Total Est. Value