



COMMERCIAL/RESIDENTIAL BUILDING PERMIT APPLICATION

Address of Building Site:		Parcel Number:	
Year Home was Constructed:		Pre-1978 <input type="checkbox"/> (Complete Area Below)	After 1978 <input type="checkbox"/>
Lead Certification Information:			
Included <u>Lead-Free</u> Certification with Application <input type="checkbox"/>		Work Being Conducted by Homeowner <input type="checkbox"/>	
Work Being Conducted by Certified/Licensed Firm: <input type="checkbox"/>		EPA Number: _____	

Legal Description:			
Type of Improvement: <input type="checkbox"/> New <input type="checkbox"/> Alteration <input type="checkbox"/> Addition <input type="checkbox"/> Repair <input type="checkbox"/> Reroof <input type="checkbox"/> Raze <input type="checkbox"/> Move			
Project Description:		Estimated Cost:	
Applicant is: <input type="checkbox"/> Owner <input type="checkbox"/> Licensed Contractor <input type="checkbox"/> Architect/Engineer <input type="checkbox"/> Project Manager <input type="checkbox"/> Other			

Property Owner Name:				
Street Address:		City:	State:	Zip:
Contact Person:		Telephone Number:	Email:	

Applicant Name:		License Number:		
Street Address:		City:	State:	Zip:
Contact Person:		Telephone Number:	Email:	

Contractor Name:		License Number:		
Street Address:		City:	State:	Zip:
Contact Person:		Telephone Number:	Email:	

Designer Name:		License Number:		
Street Address:		City:	State:	Zip:
Contact Person:		Telephone Number:		

Excavator Name:				
Street Address:		City:	State:	Zip:
Contact Person:		Telephone Number:		

Mechanical Contractor Name:				
Street Address:		City:	State:	Zip:
Contact Person:		Telephone Number:		

Plumbing Contractor Name:				
Street Address:		City:	State:	Zip:
Contact Person:		Telephone Number:		

Signature of Applicant or Agent: _____ **Date:** _____