



# Residential Permit Application

CITY

## **BUILDING PERMIT APPLICATION SUBMITTAL REQUIREMENTS, AS APPLICABLE**

**Two Complete Sets of Construction Plans, Drawn to Scale and Including:**

- Foundation plan
- Floor plan; main, basement, garage and upper level(s), if applicable.
- Front, rear and side elevations
- Wall section
- Stair section with guardrail/handrail details
- A completed "Building Certificate" form to show how Energy Code Compliance will be achieved
- Special details, if any

**Right of Way Permit Application (If applicable)**

**A Site Plan Drawn to 1:20 Scale Showing:**

- North Arrow
- Lot Dimensions
- Location and Names of all Adjoining Streets
- Location of Easements
- Front, Side and Rear Yard Setbacks
- Driveway and Curb Openings; Location and Size
- Location and Size of Water, Sewer, and Electrical Services; Existing and Proposed
- Location of Structures in Relationship to Each Other, Property Line and Easements
- Dimensions of all Structures

**Construction Stormwater Permit Application**



## BUILDING PERMIT APPLICATION

<b>Address of Building Site:</b>	<b>Parcel Number:</b>
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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:	<b>Estimated Cost:</b>
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	

<b>Property Owner Name:</b>			
<b>Street Address:</b>	<b>City:</b>	<b>State:</b>	<b>Zip:</b>
<b>Contact Person:</b>	<b>Telephone Number:</b>	<b>Email:</b>	

<b>Applicant Name:</b>		<b>License Number:</b>	
<b>Street Address:</b>	<b>City:</b>	<b>State:</b>	<b>Zip:</b>
<b>Contact Person:</b>	<b>Telephone Number:</b>	<b>Email:</b>	

<b>Contractor Name:</b>		<b>License Number:</b>	
<b>Street Address:</b>	<b>City:</b>	<b>State:</b>	<b>Zip:</b>
<b>Contact Person:</b>	<b>Telephone Number:</b>	<b>Email:</b>	

<b>Designer Name:</b>		<b>License Number:</b>	
<b>Street Address:</b>	<b>City:</b>	<b>State:</b>	<b>Zip:</b>
<b>Contact Person:</b>	<b>Telephone Number:</b>		

<b>Excavator Name:</b>			
<b>Street Address:</b>	<b>City:</b>	<b>State:</b>	<b>Zip:</b>
<b>Contact Person:</b>	<b>Telephone Number:</b>		

<b>Mechanical Contractor Name:</b>			
<b>Street Address:</b>	<b>City:</b>	<b>State:</b>	<b>Zip:</b>
<b>Contact Person:</b>	<b>Telephone Number:</b>		

<b>Plumbing Contractor Name:</b>			
<b>Street Address:</b>	<b>City:</b>	<b>State:</b>	<b>Zip:</b>
<b>Contact Person:</b>	<b>Telephone Number:</b>		

Signature of Applicant or Agent \_\_\_\_\_ Date \_\_\_\_\_