



RESIDENTIAL PERMIT APPLICATION

JOB ADDRESS:CONDEMNED/P.M.? ☐ Yes ☐ No

Applicant Name		Phone #
Address		E Mail
City	State	Zip
Company Name		OWNER CONTRACTOR? ☐ Yes ☐ No

Property Owner Name		Phone #
Address		E Mail
City	State	Zip

Permit is For: ☐ New House ☐ Addition ☐ Remodel ☐ Repair ☐ Move ☐ Demolish ☐ Accessory Structure

Type of Use: ☐ Single Family ☐ Two Family ☐ Group Home ☐ Multi Family ☐ Other

NEW HOMES: Sewage Disposal: ☐ Public Sewer ☐ Septic System (Requires Copy of Permit)

NEW HOMES: Air Leakage: ☐ Visual Inspection Checklist ☐ Testing (Blower Door)

Insulation Material: WallsAtticCrawl

SCOPE OF WORK:

LIST THE INTENDED USE/USES FOR ACCESSORY STRUCTURES AND ADDITIONS.

TOTAL CONTRACT PRICE \$

NOTE: IF YOU CHECKED GROUP, MULTI, OR OTHER; THE ZONING QUESTIONNAIRE MUST ACCOMPANY THIS APPLICATION.

OFFICE USE ONLY		Special Conditions:		NOTICE Separate permits are required for electrical, plumbing, mechanical, and fuel gas work. This permit becomes null and void if; work or construction authorized is not commenced within six months, construction or work is suspended or abandoned for a period of six months at any time after work is commenced, or Community Development property maintenance and condemned property notices have expired. Connection of utilities must be authorized by the Building Department. Failure to make corrections to substandard construction materials or installations shall result in withholding of utilities. I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction. SIGNATURE OF APPLICANTDATE	
# of Bedrooms	Code Edition	Construction Type			
# of Stories	Occupancy Class	Zoning District			
# of Baths	Flood Hazard	Fuel Sources			
	X AE A	Elec. Solar Gas			
Total Square Feet					
	Approved By:	Date:			
Total BTU					
BUILDING FTG SURV ELEV2 FLRS SLAB MONO STRM GARA SH/FR FIRWL WFP VIC INSU ELEV3 BD SS BF					
PLUMBING PRS RAD1 RAD2 PTO PRNC SEW PF		Permit #	Initials:		
ELECTRICAL POLE ERNS ERN TEMP EF ECHN SERV					
MECHANICAL MJ MRN DET MF		Community Development Official Notice No.			
GAS GRN CONC GFP GF					

For **Additions/Accessory Structures** please include the following drawings and details:

1. Sketch of the proposed addition/accessory structures in relation to the existing home and property lines with dimensions. Indicate location of other structures (including swimming pools) with dimensions.
2. Floor plan (with bath fixture locations) , room types, elevations, foundation plan, and framing plan.
3. Location of driveway, septic tank/field lines, and electrical service from transformer to home.

* If complete plans and survey are submitted with this permit application, no additional drawings are needed.*

*** Incomplete submittals are subject to rejection.***

This image shows a full page of blank graph paper. The grid consists of thin, light blue horizontal and vertical lines that intersect to form small squares across the entire surface. There are no margins, text, or other markings on the paper.