



COMMERCIAL BUILDING PERMIT APPLICATION

Please print clearly all information. Incomplete applications will not be accepted.
FAILURE TO OBTAIN A PERMIT BEFORE CONSTRUCTION BEGINS WILL
RESULT IN FEE BEING DOUBLED

JOB SITE ADDRESS: _____

NAME OF BUSINESS: _____

BUILDING OWNER: _____

CONTRACTOR: (ALL CONTRACTORS MUST BE REGISTERED WITH THIS OFFICE BEFORE PERMIT ISSUANCE)

COMPANY NAME: _____

CONTRACTOR NAME: _____

OFFICE PHONE: _____ CELL PHONE: _____

CONTACT EMAIL: _____

DESIGNER: _____

STRUCTURAL ENGINEER: _____

ELECTRICAL ENGINEER: _____

MECH/ PLUMBING ENGINEER: _____

BUILDING/ WORK TYPE: NEW NEW (SHELL ONLY)
 REMODEL ADDITION DEMOLITION
 ROOF FENCE OTHER _____

GAS IN BUILDING YES NO FIRE SPRINKLER YES NO

FLOOD PLAIN: YES NO (IF YES, DEVELOPMENT PERMIT IS NEEDED BEFORE PERMIT ISSUANCE)

SQUARE FOOTAGE: TOTAL SQ. FOOT: _____ # OF FLOORS _____

VALUATION OF WORK: _____ # OF PARKING SPACES REQUIRED _____

DESCRIPTION OF WORK: _____

CHECK OFF LIST: 2 COMPLETE SETS OF PLANS ADA LETTER (JOBS OVER \$50,000)
 COM CHECK SITE WATER RUNOFF PLANS ASBESTOS SURVEY (REMODELS ONLY)

Printed name _____ Signature _____

Date _____ Application accepted by: _____