PERMIT APPLICATION

Non UCC	Page of
Building Bormit	Fire Protection Permit
	Fire Protection Permit
Construction Site Location	County Date Received
	Date Received
Owner	Tenant
City State 7in	Address StateZip
Dhone # Coll #	City StateZip
Email	Phone # Cell #
	Email
Describe Proposed Work in Detail:	
BUILDING PERMIT	
Contractor	
(if owner put same as above)	# of Stories Height of Structure Total SQ FT Use Group Type Const Description of Work:
City State Zin	Total SO FT
Phone # Cell #	Use Group Type Const
Email	Description of Work:
HIC#	
Federal Employee#(Certification of Insurance for Worker Compensation needed or sign exemption form)	
State Classification	Other:
New Residential Other Residential	Father at a Tatal Oaata Fan All Manla
New Commercial Other Commercial_	Estimate Total Costs For All Work:
FIRE PROTECTION PERMIT	
Contractor(if owner put same as above)	
(if owner put same as above)	Sprinklar Systam:
Address State Zip _	Sprinkler System:
Phone # Cell #	Alarm System:
	Alam bystem.
State Classification	Commercial Cooking Equip.:
New Residential Other Residential	Other:
New Commercial Other Commercial_	Estimate Total Costs For All Work:
I hereby acknowledge that I have read this application and state the above is correct to comply with all	
Municipal ordinances a	nd state laws regarding construction.
Ciam atoma.	
Signature:	
Owner () Contractor () Owner Repr	esentative ()
CODE	OFFICIAL USE ONLY
UCC Building Fee:	Plans Approved
3 ————	
Plan Review Fee: FP Fee	: Plans Approved with Comments
Admin Fee:	Code Official:
_	
State Fee:	State Cert. #:
Total Cost:	Date:
Email HIC # Federal Employee# (Certification of Insurance for Worker Compensation needed or sign exemption form) State Classification New Residential Other Residential	Commercial Cooking Equip.:
Federal Employee#	
State Classification	Commercial Cooking Equip.:
New Residential Other Residential	Other:
New Commercial Other Commercial	Estimate Total Costs For All Work:
New Commercial Other Commercial_	LStilllate Total Costs For All Work
I hereby acknowledge that I have read this a	onlication and state the above is correct to comply with all
·	
Signature: Owner () Contractor () Owner Repr	
Owner () Contractor () Owner Repr	esentative ()
CODE	OFFICIAL USE ONLY
OGO Building Fee.	Tians Approved
Plan Review Fee: FP Fee	Plans Approved with Comments
Plan Review Fee: FP Fee	E Plans Approved with Comments
Admin Face	0.1-04:-1-1
Aamin Fee:	Code Official:
State Fee:	State Cert. #:
Total Cost	
10101 0001	Dato