



COMMERCIAL PERMIT APPLICATION

Project Address: _____
(Street address) (Suite no. / building no.)

Subdivision: _____ Block: _____ Lot: _____

Property Owner: _____
(Name) (Address) (City, state, & zip code) (Phone)

Contractor	Name	Address	City, State & Zip Code	Phone Number
General:				
Electric:				
Plumbing:				
Mechanical:				
Other:				

Type of Work:

- Interior Finish
 New Construction
 Shell Only
 Addition
 Alteration/Remodel
 Demolition
 Other

Description of Work (please be specific): _____

Business Name: _____ New/Existing Business: _____ Gas Required: YES / NO
 Type of Business: _____ Use of Space: _____ Fire Sprinklered: YES / NO
 Valuation of Work: \$ _____ Square Footage of Project: _____ Fire Alarm: YES / NO
 Number of Stories: _____ Number of Dwelling Units (for apartments): _____

******A separate permit is required for each tenant spaces and/or building. ******

AN ISSUED PERMIT BECOMES INVALID IF THE WORK ON THE SITE AUTHORIZED BY THE PERMIT DOES NOT COMMENCE WITHIN 180 DAYS OF ISSUANCE, OR IF THE WORK ON THE SITE IS INCOMPLETE DUE TO SUSPENSION OR ABANDONMENT 180 DAYS AFTER THE WORK COMMENCED. **ALL PERMITS REQUIRE FINAL INSPECTION.**

I HEREBY CERTIFY THAT I AM AN AUTHORIZED AGENT OF THE OWNER, AND HAVE THE OWNER'S CONSENT TO ENTER ONTO THE PROPERTY TO COMPLETE THE WORK. AFTER CLOSE REVIEW OF THIS APPLICATION, I FURTHER CERTIFY THAT THE INFORMATION PROVIDED IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. THE WORK SHALL COMPLY WITH ALL PROVISIONS OF LAWS AND ORDINANCES, WHETHER SPECIFIED OR NOT. THE GRANT OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY FEDERAL, STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.

Signature of Applicant: _____ Date: _____

Contact Name: _____ Phone: _____
(Please print)

Email Address: _____ Fax Number: _____

FOR OFFICE USE ONLY

PERMIT # _____
 Rolled Plans
 Attached Plans
 Zoning: _____
 Permit Technician Approval: _____
 Date: _____
 Occupancy Group: _____
 Plans Examiner Approval: _____
 Date: _____
 Type of Construction: _____
 Permit Received By: _____
 Date: _____
 Fired Sprinklered: _____
 Fire Alarm Required: _____

COMMENTS: _____

