



Application for Building Permit

PERMIT REQUESTED: (Choose One)

- Building
- Siding
- Chimney
- Sign
- Demolition
- Swimming Pool
- Fence
- Foundation Only
- Roofing

WORK CLASS: (Choose those that apply)

- Abandonment
- Demolition
- Remodel
- Tenant Fit-out
- Addition
- Disconnection
- Removal
- Tenant Improvement
- Alteration
- Install
- Repair
- Change of Use
- New
- Service Change
- Conversion
- Relocation
- Temporary Service

Applicant's Name: _____
Address: _____
City/State/Zip: _____
Phone #: _____

LOCATION OF WORK:
Map/Block/Lot: _____

Contractor's Name: _____
Address: _____
City/State/Zip: _____
Phone #: _____

Type of License: _____
License #: _____
Certificate of Insurance ? Yes No
Insurance Expiration Date: _____
Worker Compensation Form 7A, 7B, 7C? Yes No

Owner's Name: _____
Address: _____
City/State/Zip: _____
Phone #: _____

Architect's Name: _____
Address: _____
City/State/Zip: _____
Phone #: _____

BUILDING TYPE: (Choose One)

- Residential
- Industrial
- Commercial
- Other _____

CODE TYPE:

- IBC
- IRC
- IEBC

CHANGE OF USE: YES NO

CONSTRUCTION TYPE: _____

OCCUPANCY CODE: _____

BUILDING SPRINKLED: YES NO

DESIGN OCCUPANT LOAD: _____

ENTERPRISE ZONE: YES NO

- REQUIRES:** Certificate of Occupancy (CO)
 Certificate of Approval (CA)

DESCRIPTION OF WORK:

"WORK ITEMS" - check all that apply to this application:

- | | | |
|---|---|---|
| <input type="radio"/> Accessibility Ramp - Commercial | <input type="radio"/> Garage - Commercial - Addition | <input type="radio"/> Single Family - Foundation Only |
| <input type="radio"/> Accessibility Ramp - Residential | <input type="radio"/> Garage - Commercial - Alteration | <input type="radio"/> Single Family - New |
| <input type="radio"/> Awning - Commercial | <input type="radio"/> Garage - Commercial - New | <input type="radio"/> Single Family - Remodel |
| <input type="radio"/> Awning - Residential | <input type="radio"/> Garage - Commercial - Remodel | <input type="radio"/> Telecommunication Tower |
| <input type="radio"/> Commercial - Addition | <input type="radio"/> Garage - Residential - Addition | <input type="radio"/> Temporary Structure - Commercial |
| <input type="radio"/> Commercial - Alteration | <input type="radio"/> Garage - Residential - Alteration | <input type="radio"/> Temporary Structure - Residential |
| <input type="radio"/> Commercial - Façade Improvement | <input type="radio"/> Garage - Residential - New | <input type="radio"/> Two Family - Addition |
| <input type="radio"/> Commercial - New | <input type="radio"/> Garage - Residential - Remodel | <input type="radio"/> Two Family - Alteration |
| <input type="radio"/> Commercial - Other - new | <input type="radio"/> Move Building | <input type="radio"/> Two Family - Foundation Only |
| <input type="radio"/> Commercial - Remodel | <input type="radio"/> Multi Family - Addition | <input type="radio"/> Two Family - New |
| <input type="radio"/> Conversion (change # families) ≤2 | <input type="radio"/> Multi Family - Alteration | <input type="radio"/> Two Family - Remodel |
| <input type="radio"/> Conversion (change # families) >2 | <input type="radio"/> Multi Family - Foundation Only | <input type="radio"/> Wheelchair Ramp - Residential |
| <input type="radio"/> Deck - Addition - Commercial | <input type="radio"/> Multi Family - New/condo | |
| <input type="radio"/> Deck - New - Commercial | <input type="radio"/> Multi Family - Remodel | |
| <input type="radio"/> Deck - Replacement - Commercial | <input type="radio"/> Residential - Other | |
| <input type="radio"/> Deck - Residential - Addition | <input type="radio"/> Retaining Wall - Commercial | |
| <input type="radio"/> Deck - Residential - New | <input type="radio"/> Retaining Wall - Residential >3' | |
| <input type="radio"/> Deck - Residential - Replacement | <input type="radio"/> Shed - Commercial | |
| <input type="radio"/> Elevator - Commercial | <input type="radio"/> Shed - Residential | |
| <input type="radio"/> Elevator - Residential (exterior) | <input type="radio"/> Single Family - Addition | |
| <input type="radio"/> Elevator - Residential (interior) | <input type="radio"/> Single Family - Alteration | |

FOUNDATION ONLY
"WORK ITEMS"-Check all that apply to this application:
 Commercial - Foundation Only
 Garage - Commercial - Foundation Only
 Garage - Residential - Foundation Only

OVER

FENCE -please answer the following:
 Corner Lot? YES NO **Setback:** _____

ROOFING -please answer the following:
 Sq. ft. of roof _____ **Front Width:** _____

Type of Fence _____ Front _____
 Height of Fence _____ Rear _____
 Depth of Footing _____ Side _____
"WORK ITEMS"-Check all that apply to this application:
 Fence - Commercial Fence - Residential

SWIMMING POOL -please answer the following:
 # Families _____ Setback: _____
 Size of Pool _____ Front _____
 Attached decks YES NO Rear _____
 Type of Pool: Above Ground Side _____
 In-ground
 Spa
 Protection Provided: Safety Gate Alarm Fence
"WORK ITEMS"-Check all that apply to this application:
 Pool - Commercial Pool - Residential

SIDING-please answer the following:
 # Stories _____ Structure Size: _____
 Fastener Type _____ Front _____
 Type of Siding _____ Rear _____
 Connected to _____ Width _____
 Material Beneath Siding _____
 Size Ground Connector _____
"WORK ITEMS"-Check all that apply to this application:
 Siding - Commercial Siding - Residential

SIGN-please answer the following:
 Name on Sign _____
 Sign Manufacturer _____
 Sign License # _____
 UL Listed ? Company YES NO Sign YES NO
 UL Number _____
"WORK ITEMS"-Check all that apply to this application:
 Billboard Canopy (letters) Ground/Pylon Sign
 Wall Sign Directional Signs

Squares of roof _____ Rear Width: _____
 Removing layers YES NO Side Length: _____
 # Coverings present _____
 Material beneath roof _____
 Type of roof covering _____
 Manufacturer _____
 Style of roof _____
 Pitch of roof _____ Size of vent _____
 Flashing type _____
 Rafter size _____
 Louver vent YES NO Ridge vent YES NO
 Ice & Water YES NO Felt paper YES NO
 Spacings _____
"WORK ITEMS"-Check all that apply to this application:
 Roof - Commercial Roof - Residential

DEMOLITION-please answer the following:
 # Stories _____ Structure Size: _____
 # Families _____ Front _____
 Permit bond required YES NO Rear _____
 Health Dept. Notified YES NO Depth _____
 Fence or barricade YES NO
 Excavation Filled to Grade YES NO
 Bldg purpose was _____
 Disposal site _____
 Asbestos Disposal site _____
"WORK ITEMS"-Check all that apply to this application:
 Commercial Residential
 Accessory Structure

ESTIMATED COST: \$ _____

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as an authorized agent and we agree to conform to all applicable laws of this jurisdiction.

APPLICANT'S NAME (please print): _____

SIGNATURE: _____

OWNER'S NAME (please print): _____
 (Required for demolition permits)

SIGNATURE: _____

For Inspector's Use Only - Do Not Write Below This Line:

Reviews Required?

Delinquent Tax <input type="radio"/> Yes <input type="radio"/> No	Water <input type="radio"/> Yes <input type="radio"/> No
Zoning <input type="radio"/> Yes <input type="radio"/> No	W.P.C. <input type="radio"/> Yes <input type="radio"/> No
Inland/Wetland <input type="radio"/> Yes <input type="radio"/> No	Traffic (City) <input type="radio"/> Yes <input type="radio"/> No
City Plan <input type="radio"/> Yes <input type="radio"/> No	Traffic (State) <input type="radio"/> Yes <input type="radio"/> No
Fire Marshal <input type="radio"/> Yes <input type="radio"/> No	Health <input type="radio"/> Yes <input type="radio"/> No
Engineering <input type="radio"/> Yes <input type="radio"/> No	

Application Reviewed - OK to Issue Permit:

Permit Fee: \$ _____
 State Fee: \$ _____
 CO Fee: \$ _____
 Penalty Fee: \$ _____
Total Fee: \$ _____

 (Authorizing Inspector's Signature)

Cash/Check # _____



