

*BUILDING PERMIT APPLICATION*

<b>PROJECT SUMMARY:</b>		
<b>Project Name:</b>		<b>City/ETA Location:</b> <input type="checkbox"/> City <input type="checkbox"/> ETA (application fee & number of copies needed are based on location)
<b>Property Location (Legal Description – Lot, Block, Addition):</b>		
<b>Property Address:</b>		
<b>New Construction or Addition to Existing:</b> <input type="checkbox"/> New Construction <input type="checkbox"/> Addition to Existing		<b>Existing Use of Property:</b>
<b>Parcel Size (sf):</b>		<b>Building Footprint (sf):</b>
<b>Number of Stories:</b>		<b>Total Square Footage of Building:</b>
<b>Proposed Use of Property/Building (with square footages of each use if multiple uses):</b>		<b>Number of Off-street Parking Spaces Required:</b>
		<b>Number of Off-street Parking Spaces Provided:</b>
<b>PROPERTY OWNER:</b>		
<b>Name:</b>		<b>Daytime Telephone Number:</b>
<b>Mailing Address:</b>		
<b>DEVELOPER (IF DIFFERENT THAN OWNER):</b>		
<b>Name:</b>		<b>Daytime Telephone Number:</b>
<b>Mailing Address :</b>		
<b>CONTACT PERSON (FOR PURPOSES OF PROCESSING THIS APPLICATION):</b>		
<b>Name of Contact Person:</b>		<b>Name of Firm (if applicable):</b>
<b>Mailing Address:</b>		
<b>Daytime Phone Number:</b>	<b>Fax Number:</b>	<b>E-mail Address:</b>
<b>TO BE COMPLETED BY CITY STAFF:</b>		
<b>Zoning District:</b>		
<b>Occupancy Classification:</b>		
<b>Type of Construction:</b> <input type="checkbox"/> I – F.R. <input type="checkbox"/> II – F.R, One-hour, N <input type="checkbox"/> III – One-hour, N <input type="checkbox"/> IV – H.T. <input type="checkbox"/> V – One-hour, N		