

# Plan Examination & Building Permit Application

Site Address:		Date:
Space / suite #		<b>Have mechanical plans been provided:</b> HVAC      Yes ___ No ___ N/A ___ Plumbing    Yes ___ No ___ N/A ___ Electrical    Yes ___ No ___ N/A ___ Fire protection Yes ___ No ___ N/A ___
Anticipated Start date:	Anticipated Completion date:	
Description of Work:		
		<b>FOR OFFICE USE ONLY</b>
Total Cost of Work (w/o mechanicals):		Permit Fee: \$
Total Cost of Work (w/ mechanicals):		Plan Review Fee: \$

\*SEE PERMIT FEE SCHEDULE FOR CURRENT RATES.

Residential Building Section only	Finished Floor Area (gross sq ft.)	Finished Basement Area (gross sq ft.)	Unfinished Basement Area (gross sq ft.)	Garages & Carports (gross sq ft.)	OFF ST. PARKING		# OF BEDROOMS	# OF BATHROOMS		BASEMENT	CRAWLSPACE	ON SLAB
					Outdoor	Indoor		F	P			
AREA												
RATE *												
TOTAL \$												

### SUBCONTRACTORS

ELECTRICAL:	ROOFING (LIC. #):	CROSS CONNECTION:
PLUMBING:	ELEVATOR:	ALARM:
H.V.A.C.:	SIGN:	FIRE SPRINKLER:
EXCAVATOR:	DEMOLITION:	OTHER:

	NAME	ADDRESS	PHONE
OWNER			
ARCHITECT			
ENGINEER			
CONTRACTOR			
SUPERINTENDENT			



**NOTE: Plan review fee due when plans are submitted.  
Permit fee due when plans have been approved.**

***Application/Permit void if work is not started within 6 months after permit issuance.***