



Permit # _____

COMMERCIAL BUILDING PERMIT

Property Owner: _____ Applicant: _____

Mailing Address: _____

Site Address: _____

Phone: _____ Email: _____

Property owner conducting the work? YES NO (State Licensed Electrician & Plumbers only for Commercial)

GENERAL CONTRACTOR		
Name:	Email:	
Phone:	City License No.:	
BUILDING CONTRACTOR		
Name:	Email:	
Phone:	City License No.:	
PLUMBING CONTRACTOR		
Name:	Email:	
Phone:	City License No.:	State License No.:
ELECTRICAL CONTRACTOR		
Name:	Email:	
Phone:	City License No.:	State License No.:
MECHANICAL CONTRACTOR		
Name:	Email:	
Phone:	City License No.:	
ALTERNATE CONTRACTOR TYPE		
Name:	Email:	
Phone:	City License No.:	
PURPOSE OF PERMIT TYPE & TYPE OF FOUNDATION	TYPE OF CONSTRUCTION:	CONSTRUCTION REQUESTS:
<input type="checkbox"/> NEW BUILDING <input type="checkbox"/> CRAWLSPACE <input type="checkbox"/> ADDITION <input type="checkbox"/> FOOTING AND STEM WALL <input type="checkbox"/> REMODEL <input type="checkbox"/> MONOLYTHIC SLAB <input type="checkbox"/> REPAIR/REPLACEMENT <input type="checkbox"/> PIER/PILE <input type="checkbox"/> OFFICE/WAREHOUSE <input type="checkbox"/> CAISSONS <input type="checkbox"/> CHANGE OF OCCUPANCY <input type="checkbox"/> BASEMENT <input type="checkbox"/> NEW SYSTEM <input type="checkbox"/> OTHER: _____ <input type="checkbox"/> OTHER _____	<input type="checkbox"/> TYPE IA NONCOMBUSTIBLE CONST PROTECTED <input type="checkbox"/> TYPE IB NONCOMBUSTIBLE CONST UNPROTECTED <input type="checkbox"/> TYPE IIA FIRE RESISTIVE CONST PROTECTED <input type="checkbox"/> TYPE IIB FIRE RESISTIVE CONST UNPROTECTED <input type="checkbox"/> TYPE IIIA METAL FRAME PROTECTED <input type="checkbox"/> TYPE IIIB METAL FRAME UNPROTECTED <input type="checkbox"/> TYPE VA WOOD FRAME PROTECTED <input type="checkbox"/> TYPE VB WOOD FRAME UNPROTECTED	TEMP ELECTRICAL METER <input type="checkbox"/> YES <input type="checkbox"/> NO TEMP WATER METER <input type="checkbox"/> YES <input type="checkbox"/> NO TEMP SEWER CONNECTION <input type="checkbox"/> YES <input type="checkbox"/> NO FIRE SPRINKLER REQUIRED <input type="checkbox"/> YES <input type="checkbox"/> NO FIRE DISTRICT APPROVAL <input type="checkbox"/> YES <input type="checkbox"/> NO A/C INCLUDED <input type="checkbox"/> YES <input type="checkbox"/> NO
TYPE OF WATER, SEWER PERMANENT UTILITIES	TYPE OF HEATING & ELECTRIC	SQUARE FOOTAGE
<input type="checkbox"/> PUBLIC: _____ WATER AND SEWER <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> PRIVATE: (SEPTIC) _____ ELECTRICAL <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> WELL <input type="checkbox"/> CISTERN GAS <input type="checkbox"/> YES <input type="checkbox"/> NO PERMIT # _____	<input type="checkbox"/> NAT. GAS: _____ <input type="checkbox"/> XCEL <input type="checkbox"/> PROPANE: _____ <input type="checkbox"/> PVREA <input type="checkbox"/> ELECTRIC: _____ <input type="checkbox"/> UNITED POWER <input type="checkbox"/> APPLIANCE TYPE: _____ <input type="checkbox"/> OTHER _____ SIZE OF SVC: _____ AMPS	FLOOR 1 _____ FLOOR 2 _____ FLOOR 3 _____ ADD FLRS _____ FIRE AREA _____ TOTAL _____ HEIGHT OF BUILDING _____ # OF STORIES _____ 1ST OCCUPANCY CLASS _____ (A,B,E,F,H,I,M,S,U) 2ND OCC CLASS _____
PROJECT DESCRIPTION <i>Include any details that are not listed above such as type of foundation, construction material, master plan no. etc.</i>		

VALUATION	OFFICE USE ONLY	
	PERMIT FEES	STAFF COMMENTS
Labor: \$ _____	Building Permit Fee: \$ _____	
Electrical: \$ _____	Plan Review Fee: \$ _____	
Material: \$ _____	Use Tax: \$ _____	
Total Value: \$ _____	Total: \$ _____	

ALL APPLICATIONS MUST INCLUDE

- COMPLETED APPLICATION FORM
- SITE PLAN
- ICC BUILDING GUIDES (*required for basement finishes, detached garages, patio enclosure, additions, patio covers, carports, pole barns and uncovered decks and porches*)

THE FOLLOWING DOCUMENTS MAY BE REQUIRED

- SIGNED WAIVER FROM PROPERTY OWNER, IF TENANT IS THE APPLICANT
- BUILDING PLANS
- SITE GRADING PLAN STAMPED BY A CIVIL ENGINEER
- ENGINEERED FOUNDATION DRAWINGS
- MECHANICAL, PLUMBING AND ELECTRICAL DRAWINGS
- MANUAL J,S, D AND SUPPORTING DOCUMENTS

OTHER DOCUMENTS MAY BE REQUIRED AS DEEMED NECESSARY BY THE BUILDING DEPARTMENT.

NOTICE

*The applicant, their agents and employees shall comply with all the rules, restrictions and requirements of the City and Building Codes governing location, construction, and erection of the above proposed work for which the permit is granted. The City or its agents are authorized to order the immediate cessation of construction at any time a violation of the codes or regulations appears to have occurred. Violation of any of the applicable codes or regulations may result in the revocation of this permit. Buildings MUST conform with plans, as submitted to the City. Any changes of plans or layout must be approved prior to the changes being made. Any change in the use or occupancy of the building or structure must be approved prior to proceeding with construction. **By signing this application, the applicant understands that the Homeowners Association (HOA), if applicable, may have additional requirements, restrictions, and guidelines to follow for construction.** The applicant is required to call for inspections at various stages of the construction, and in accordance with the aforesaid requirement, the applicant shall give the building inspector not less than one working days' notice to perform such activities.*

By my signature below, I acknowledge (1) that I am responsible for the payment of the plan review fee and the administrative review fee associated with this application regardless of whether I obtain the building permit or not, and regardless of any lapse in building permit approval; and (2) that before I am entitled to obtain a building permit for this property, I must pay any delinquent building permit fees associated with this property.

Applicant Signature: _____ Date: _____

Staff Signature: _____ Date: _____

Required Inspections

- | | | | |
|---|--|---|---|
| <input type="checkbox"/> Construction Meter | <input type="checkbox"/> Gas Test | <input type="checkbox"/> Exterior Sheathing | <input type="checkbox"/> Firewall |
| <input type="checkbox"/> Underground Plumbing | <input type="checkbox"/> Rough Frame | <input type="checkbox"/> Above Ceiling Electrical | <input type="checkbox"/> Backflow |
| <input type="checkbox"/> Underground Electric | <input type="checkbox"/> Rough Mechanical | <input type="checkbox"/> Above Ceiling Mechanical | <input type="checkbox"/> Final Mechanical |
| <input type="checkbox"/> U/G Gas Line | <input type="checkbox"/> Rough Plumbing | <input type="checkbox"/> Insulation | <input type="checkbox"/> Final Plumbing |
| <input type="checkbox"/> Permanent Meter | <input type="checkbox"/> Fire Department Rough | <input type="checkbox"/> Drywall | <input type="checkbox"/> Final Electrical |
| <input type="checkbox"/> Rough Electric | <input type="checkbox"/> Water Resistant Barrier | <input type="checkbox"/> Above Ceiling Plumbing | <input type="checkbox"/> Final Building |
| | <input type="checkbox"/> Final Approval | <input type="checkbox"/> Fire Department Final Approval | |