

### Commercial Building Permit Application

Image Field

Project \_\_\_\_\_ Date: 9/3/20

Address \_\_\_\_\_

Site Directions

Property Owner \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Project Contact Person \_\_\_\_\_ Job Site Phone \_\_\_\_\_

email \_\_\_\_\_ Fax Number \_\_\_\_\_

Total Project Cost \$ \_\_\_\_\_

Description of Proposed Work

Type of Building:  New  Existing  Addition Building Height (feet) \_\_\_\_\_ No. of Stories \_\_\_\_\_

Type of Construction:  I A  I B  II A  II B  III A  III B  IV  V A  V B

Occupancy:  A-1  A-2  A-3  A-4  A-5  B  E  F-1  F-2  H-1  H-2  H-3  H-4  
 H-5  I-1  I-2  I-3  I-4  M  R1  R2  R3  R4  S1  S2  Mixed

Square Footage	Finished Heated	Unfinished Areas
Basement	_____	Crawl Space _____
1st Floor	_____	Basement _____
2nd Floor	_____	Garage _____
3rd Floor	_____	Carport _____
4th Floor	_____	Deck(s) _____
		Porch(es) _____
		Other _____
Total	_____	Total _____

Water:  Public  Private

Sewer:  Public  Septic

Type of Heating Equipment: Gas  Type: LP  Natural  Low Voltage Wiring  Sewer Line

Construction Trailer: Yes:  No:

Construction/Business Sign: Yes:  No:

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**General Contractor:** License # \_\_\_\_\_ Classification: \_\_\_\_\_ Email: \_\_\_\_\_

Contractor Name: \_\_\_\_\_ Phone Number \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Design Professional: \_\_\_\_\_ Phone Number \_\_\_\_\_

**Electrical Contractor:** License # \_\_\_\_\_ Classification: \_\_\_\_\_

Contractor Name: \_\_\_\_\_ Phone Number \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Design Professional: \_\_\_\_\_ Phone Number \_\_\_\_\_

**HVAC Contractor:** License # \_\_\_\_\_ Classification: \_\_\_\_\_

Contractor Name: \_\_\_\_\_ Phone Number \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Design Professional: \_\_\_\_\_ Phone Number \_\_\_\_\_

**Gas Piping Contractor:** License # \_\_\_\_\_ Classification: \_\_\_\_\_

Contractor Name: \_\_\_\_\_ Phone Number \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Design Professional: \_\_\_\_\_ Phone Number \_\_\_\_\_

**Plumbing Contractor:** License # \_\_\_\_\_ Classification: \_\_\_\_\_

Contractor Name: \_\_\_\_\_ Phone Number \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Design Professional: \_\_\_\_\_ Phone Number \_\_\_\_\_

**Sprinkler Protection Contractor:** License # \_\_\_\_\_ Classification: \_\_\_\_\_

Contractor Name: \_\_\_\_\_ Phone Number \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Design Professional: \_\_\_\_\_ Phone Number \_\_\_\_\_

**Fire Alarm System Contractor:** License # \_\_\_\_\_ Classification: \_\_\_\_\_

Contractor Name: \_\_\_\_\_ Phone Number \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Design Professional: \_\_\_\_\_ Phone Number \_\_\_\_\_

**Insulation Contractor:** License # \_\_\_\_\_ Classification: \_\_\_\_\_

Contractor Name: \_\_\_\_\_ Phone Number \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Design Professional: \_\_\_\_\_ Phone Number \_\_\_\_\_

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## CERTIFICATION

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other applicable State and local laws and ordinances and regulations. The Building Department will be notified of any changes in the approval plans and specifications for the project permitted herein.

Qualifier Signature: \_\_\_\_\_

Date: 9/3/20

Printed Name \_\_\_\_\_

(Qualifier of State license required to pick up permit)

### OFFICE USE ONLY

Permit Fee: \$ \_\_\_\_\_

Well: \_\_\_\_\_  
Septic Prelim: \_\_\_\_\_  
Final: \_\_\_\_\_

Received By: \_\_\_\_\_  
Date: \_\_\_\_\_  
City: \_\_\_\_\_  
Fire Marshal: \_\_\_\_\_  
Site Address: \_\_\_\_\_  
Set of Plans: \_\_\_\_\_

\_\_\_\_\_  
Approved By

\_\_\_\_\_  
Date