



APPLICATION FOR CONSTRUCTION/TRADE PERMIT

APPLICATION NO.: _____ APPROVED DATE: _____ APPROVED BY: _____

TO BE COMPLETED BY THE APPLICANT

Job Address: _____

Owner Name: _____ Phone: _____ Email: _____

Mailing Address: _____ City: _____ State: _____ ZIP: _____

Contractor Name: _____ Phone: _____ Email: _____

Mailing Address: _____ City: _____ State: _____ ZIP: _____

Type of permit(s) requested: Electrical Mechanical Plumbing Sewer

Description of Work: _____

Estimated Completion Date: _____ Application Fee: _____

I understand that this application is incomplete unless all of the above information is provided including the REQUIRED APPLICATION FEE NOTED ABOVE. I further understand that the Zoning Administrator must approve or deny my application within 30 days unless I consent to an extension.

The permit associated this application shall become invalid 180 after the date on which it is issued unless during such period construction has commenced.

Except in case of emergency, permit applications must be submitted not less than three (3) business days in advance for review and processing. The Zoning Administrator reserves the right to issue or deny any permit within 30 days of application, in accordance with City Zoning Regulations. No work shall commence until a signed permit has been received by the applicant. Permit must remain at the jobsite and available for inspection by City Staff.

IT IS THE RESPONSIBILITY OF THE PERMIT HOLDER to contact the office of the Zoning Administrator **AT LEAST TWO (2) HOURS IN ADVANCE FOR ALL INSPECTIONS.** Permit holder or representative must be at the jobsite for all required inspections. Except in case of emergency, inspections must be conducted during normal business hours.

I HAVE READ AND UNDERSTAND THE ABOVE AND AGREE TO COMPLY.

Applicant Signature: _____ Date: _____