



BUILDING PERMIT APPLICATION FORM

STORAGE BUILDING

(PLAN REVIEW REQUIRED)



CONTRACTOR NAME & NUMBER: _____ DATE: _____

ADDRESS: _____ PHONE #: _____

OWNER NAME: _____

ADDRESS: _____ PHONE #: _____

TYPE JOB: _____

DIRECTIONS TO JOB FROM U.S. HWY. (29,40,41,57 OR 58): SUBDIVISION NAME: _____ LOT # _____

BUILDING SIZE: _____ W _____ L _____ H TOTAL SQUARE FEET: _____

COST OF JOB (ESTIMATED): _____

NAME AND CONTRACTOR'S # OF ELECTRICIAN: _____

NAME AND CONTRACTOR'S # OF PLUMBER: _____

NAME AND CONTRACTOR'S # OF HEATING & AIR CONTRACTOR: _____

SIZE FLOOR JOIST: _____ RAFTER SIZE OR TRUSSES: _____ NO. OF AMPS: _____

NO. OF PLB. FIXTURES: _____ WINDOW SIZE: _____

TYPE OF HEAT: _____ A/C _____ TYPE OF EXTERIOR (VINYL, BRICK, ETC.): _____

DISTANCE OFF ALL PROPERTY LINES & OTHER STRUCTURES: PLEASE DRAW ON SEPARATE SHEET

NAME OF APPLICANT: _____ PHONE #: _____

EMAIL ADDRESS: _____ CHECK IN MAIL: _____ PICK UP & PAY: _____

SIGNATURE OF APPLICANT: _____