

Project Address:		
Total Square Footage of Proposed Structure/Area:	Area of lot (total sq. ft.):	
	Garage: Yes ___ No ___ Attached ___ Detached ___ Sq. Ft.: _____	Number of Stories: ___ Number of Bathrooms: ___ Number of Bedrooms: ___
Tax Assessor's Chart, Block & Lot(s): Chart# Block # Lot #		
Current legal use: _____ Number of Residential Units _____ If vacant, what was the previous use? _____ Is property part of a subdivision? _____ If yes, please name _____ Project Description:		
<u>APPLICANT</u> – (must be owner, Lessee or Buyer)		
Name:		Work #
Business Name, if applicable:		Home#
Address:		Cell #
City/State: Zip Code:		e-mail:
<u>OWNER INFORMATION</u> – (if different from Applicant)		
Name:		Work #
Address:		Home#
City/State: Zip Code:		Cell #
		e-mail:
<u>CONTRACTOR INFORMATION:</u>		Contact when Building Permit is Ready:
Name:		Name:
Address:		Phone Number:
City/State: Zip Code:		
Phone Number:		