

Project Address:		
Total Square Footage of Proposed Structure/Area:	Area of lot (total sq. ft.): Garage: Yes <u>X</u> No ____ Attached ____ Detached ____ Sq. Ft.: ____	Number of Stories: ____ Number of Bathrooms: ____ Number of Bedrooms: ____
Tax Assessor's Chart, Block & Lot(s): <u>Chart#</u> <u>Block #</u> <u>Lot #</u> 140 - C - 21		
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: _____ Business Name, if applicable: _____ Address: _____ City/State : _____ Zip Code: _____ Work # _____ Home# _____ Cell # _____ e-mail: _____		
<u>OWNER INFORMATION</u> – (if different from Applicant) Name: _____ Address: _____ City/State : _____ Zip Code: _____ Work # _____ Home# _____ Cell # _____ e-mail: _____		
<u>CONTRACTOR INFORMATION:</u> Name: _____ Address: _____ City/State : _____ Zip Code: _____ Phone Number: _____ e-mail: _____ Contact when Building Permit is Ready: Name: _____ Phone Number: _____ e-mail: _____		