



**APPLICATION FOR PLAN REVIEW AND BUILDING PERMIT**

APPLICANT INSTRUCTIONS: Applications must complete all sections of the site plan review. Note last page for dept. use only

Application Date	Permit Type (Check those requested)	Is Owner Applicant
	Building    Rehab    Demo    Sign    Other	Yes    No

**PROPERTY INFORMATION (Location where permit is being issued)**

Street Address	Zoning	Parcel Type	Check One
Legal Description	Parcel No.	Residential Commercial	Industrial Other

**OWNER(S) INFORMATION**

Owner(s) Information	Business Phone	Phone
Street Address	City	State    Zip Code

**CONTRACTORS INFORMATION**

Business Name	Builder's License No.	Phone
Address	City	State    Zip Code
Workers Comp Carrier	MESC Employer No.	
Architect/Engineer of Project	License No.	Phone
Address	City	State    Zip Code

**CERTIFICATION**

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his or her agent and I agree to conform to all applicable laws of this jurisdiction. In addition, I certify that the code officials or representative shall have the authority to enter area covered by such permits at any reasonable hour to enforce the provisions of the code(s) applicable to such permits.

Signature of Applicant	Address	Phone
Responsible Person in Charge of Work	Title	Phone