MUNICIPALITY_____ **COUNTY**_____

Residential Building Permit Application

Tracking # _____ Permit# _____ Date: _____
By inspector

Property Pin # _____ Electric Job # _____
By owner/contractor By contractor

Builder/Contractor/Applicant Name: _____

Address: _____
Street # Street Name City State Zip

Workman's Compensation Policy # _____

Phone Numbers: _____ _____ _____
Office Cell Fax

Owner's Name: _____

Property Address: _____
Street # Street Name Lot #

Phone Numbers: _____ _____ _____

Application for _____
Examples: new house, garage, in-ground pool

Usage: ☐ Residential Other: _____

Electrical Utility Job Number:_____

Square Footages:

Basement _____	Crawl Space _____	Garage _____
First Floor _____	Second Floor _____	Third Floor _____
Patio _____	Deck _____	Shed _____

MUST BE POSTED ON JOB SITE AT ALL TIMES

An approved set of plans must be on site for every inspection or no inspections will be performed

All inspections as per Act 45 of the UCC

Applicant Name:_____
Print and Sign