

**APPLICATION FOR NEW COMMERCIAL BUILDING PERMIT**

PERMIT NO. \_\_\_\_\_

APPLICANT:		EMAIL:	
ADDRESS:			
CITY:		STATE:	ZIP:
PHONE:	CELL:	FAX:	

CONTRACTOR COMPANY:		CONT. NAME:	
ADDRESS:			
CITY:		STATE:	ZIP:
PHONE:	CELL:	FAX:	

**LOCATION:**

LOT: \_\_\_\_\_ BLOCK: \_\_\_\_\_ SECTION: \_\_\_\_\_ PHASE: \_\_\_\_\_ ZONED: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

SUBDIVISION: \_\_\_\_\_

BUSINESS NAME PROPOSED: _____	TOTAL SQUARE FOOTAGE: _____
BUSINESS TYPE PROPOSED: _____	EST. COST OF CONST.: _____
METER SIZES: DOMESTIC - _____ IRRIGATION - _____	
<b><u>BILLING ADDRESS FOR WATER USAGE WHILE UNDER CONSTRUCTION:</u></b>	
Company: _____	
Address: _____	
City, State, Zip: _____	
Phone: _____	

**SUBCONTRACTORS:**

COMPANY NAME	PHONE NUMBER	LICENSEHOLDER NAME	LICENSE NO.
<i>MECHANICAL</i>			
<i>ELECTRICAL</i>			
<i>PLUMBING</i>			

SIGNATURE OF APPLICANT: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

RECEIVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_ DATED ISSUED: \_\_\_\_\_  
**FOR CITY USE ONLY**

CHECK #
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