

TEMPORARY BUILDING PERMIT APPLICATION

OWNER:			
MAILING ADDRESS:			
PHONE:	CELL:	E-MAIL	
SITE LOCATION:			
CONTRACTOR (if not owner)	:		
OFFICE #	_ CONTACT #	CR#	<i>‡</i>
ADDRESS:			
OCCUPANCY TYPE:			
WORK TO BE DONE:			
VALUE OF CONSTRUCTION:			
START DATE OF CONSTRUCTION: COMPLETION DATE:			
SEPTIC/SEWER PERMIT NUMBER:			
SIGNATURE OF APPLICANT OR AGENT:			
ADMINISTRATION ONLY			
PERMIT FEE: FI	NAL INSPECTION DEPOS	SIT:	_ DATE PAID:
PARCEL NUMBER:	ZONE DISTRICT:		
PERMIT NO:	ISSUE DATE:		

^{*}Temporary building permits are valid for 180 days after issue.