

Permit Number: _____

Building Information

Job Address: _____

Company Name of Tenant: _____

Proposed Use of Structure: _____

Type of Work: _____ Type of Construction: _____

Occupancy Classification: _____ Sprinklered: Yes No

Square Footage: 1st Flr: _____ 2nd Flr: _____ 3rd Flr: _____ 4th Flr: _____

5th Flr: _____ 6th Flr: _____ 7th Flr: _____ 8th Flr: _____

Basement: _____ Parking Garage: _____

Type of Fuel: _____ Type of Heat: _____

Fuel Provider: _____ Electrical Provider: _____

Fire Department or Dist.: _____ Water & Sewer Provider: _____

Point of Contact Information

Property Owner: _____

Authorized Rep: _____ Ph: _____ Fax: _____ Email: _____

Architect: _____

Contact: _____ Ph: _____ Fax: _____ Email: _____

Mech & Plumb Eng: _____

Contact: _____ Ph: _____ Fax: _____ Email: _____

Electrical Eng: _____

Contact: _____ Ph: _____ Fax: _____ Email: _____

Contractors Information

General Contractor: _____ DC Lic. # _____

Contact: _____ Ph: _____ Fax: _____ Email: _____

Electrical: _____ DC Lic. # _____

Contact: _____ Ph: _____

Mechanical: _____ DC Lic. # _____

Contact: _____ Ph: _____

Plumbing: _____ DC Lic. # _____

Contact: _____ Ph: _____

Project valuation is required for : Additions, Cell sites
Tenant Finish and Tenant Improvements

- ⇒ The Plan Review fee is due at time of submittal
- ⇒ Application must be completely filled out for submittal
- ⇒ Fire Dept./ Dist. approval is required for all permits
- ⇒ Water & Sewer approval is required for all new structures

Valuation:	_____
Permit Fee:	_____ C.C. Fee: _____
Plan Review:	_____ E-470 Fee: _____
Use Tax:	_____ Zoning: _____
Total Fees:	_____ Balance Due: _____

Authorized Rep./
Applicant Signature: _____

Date: _____