

ASSESSOR PARCEL NUMBER	NAME OF FIRM	ADDRESS	ZIP CODE	ACCT. NO.	PHONE NO.
CONTRACTOR	OWNER	ARCH. ENGR.	CONST. LOAN LENDER		
DATE	DATE	DATE	DATE		
ELECTRICAL BY	PLUMBING BY	MECHANICAL BY	ISSUED BY		
DATE	DATE	DATE	DATE		

NO. OF STORIES	ROOF COVERING	AREA 1ST FLOOR	TOTAL AREA	GARAGE AREA	PATIO AREA	USE ZONE
THIS PERMIT IS FOR: <input type="checkbox"/> BUILDING <input type="checkbox"/> MECHANICAL <input type="checkbox"/> PLUMBING <input type="checkbox"/> ELECTRICAL						

REEL NO.	FRAME NO.	TO
REEL NO.	FRAME NO.	TO
REEL NO.	FRAME NO.	TO
REEL NO.	FRAME NO.	TO
REEL NO.	FRAME NO.	TO
REEL NO.	FRAME NO.	TO
REEL NO.	FRAME NO.	TO
REEL NO.	FRAME NO.	TO
REEL NO.	FRAME NO.	TO
REEL NO.	FRAME NO.	TO

PERMIT # _____

NATURE OF WORK IN DETAIL _____

REMARKS AND/OR VARIANCES _____

VALUATION \$	ISSUED BY:	DATE ISSUED	BUILDING PERMIT FEE \$	PLAN CHECK FEE \$	RDP FEE \$	S.M.I. FEE \$	REG. SEWER FEE \$	BRIDGE FEE \$	CONST. TAX \$	TOTAL \$
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