

ASSESSOR PARCEL NUMBER: _____
 NAME OF FIRM: _____
 CONTRACTOR: _____
 OWNER: _____
 ARCH. ENGR.: _____
 CONST. LOAN LENDER: _____

ADDRESS: _____
 ZIP CODE: _____
 ACCT. NO.: _____
 PHONE NO.: _____

NO. OF STORIES: _____
 ROOF COVERING: _____
 AREA 1ST FLOOR: _____
 TOTAL AREA: _____
 GARAGE AREA: _____
 PATIO AREA: _____
 USE ZONE: _____

BUILDING
 MECHANICAL
 PLUMBING
 ELECTRICAL

BUILDING ELECT. MECH. PLUMB.

PLANS AND APPLICATION	FRAME NO.-	TO
	REEL NO.	TO
	REEL NO.	TO
	REEL NO.	TO
	REEL NO.	TO
	REEL NO.	TO
	REEL NO.	TO
	REEL NO.	TO
	REEL NO.	TO
	REEL NO.	TO
	REEL NO.	TO

NATURE OF WORK IN DETAIL: _____

PERMIT # _____

REMARKS AND/OR VARIANCES

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