MUNICIPALITY PERMIT APPROVAL

THIS IS **NOT** A BUILDING PERMIT

YOU MUST CONTACT THE BUILDING PERMIT INSPECTION SERVICE COMPANY FOR YOUR MUNICIPALITY TO OBTAIN YOUR PERMIT

MUNICIPALI [*]	TY:						_ ,		
Faxed to Assessor's Office on:				Faxed	d to Bureau Veri	tas on	·	_	
DATE:			PRE-CONSTRUCTION PERMIT NUMBER:						
WORK SITE ADDRESS:									
OWNER:									
ADDRESS:									
CITY:	×	STA	TE:			ZIP:			
PHONE NUMBER:		38-41 S 48-20" - 1-12							
TAX PARCEL NUMBER:									
						DEDM	UT FEE.		
ESTIMATED COST: CONTRACTOR:			ADDRESS			PHONE			
ADCUITECT.		ADDE	DECC			PHONE			
ARCHITECT:		ADDRESS				PHONE			
ENGINEER:			ADDRESS			PHONE			
CLASS OF WORK: NEW	ADDITION		ALTERATIONS		REPAIR		DEMO		
		7.							
PROPOSED IMPROVEMENTS: TYPE OF CONSTRUCTION: (circle)		SIZE	OF BLDG (TOTAL	. SqFt):	:	NO. O	F STORIES:	11	
RESIDENTIAL / COMMERCIAL CHANGE OF USE FROM:			CHANGE OF USE TO:						
DRIVEWAY PERMIT					ROAD BONDING				
NON-FLOOD PLAIN EXEMPTION				SEWAGE PERMIT					
ELEVATION CERTIFICATE				ZONING PERMIT					
NPDES PERMIT (CONSERVATION)				GAS F PERM	PAD DRIVEWAY				
DEMOLITION				MISCE	ELLANEOUS				
IF NO PERMIT R	EQUIRED F	PLEA	SE INSERT N/A I	N THE	APPROPRIAT	E BO	(ES		
PROPERTY OWNER'S SIGNATURE					DATE	- x			
THE ABOVE MUNICIPALITY HEREBY GIVES AI	PPROVAL TO 1	THE PE	RSON(S) NAMED ABO	OVE.					

DATE ISSUED

DATE EXPIRED

SIGNATURE OF ISSUING AGENT