



MISCELLANEOUS PERMIT APPLICATION

(Please print clearly)

Property Owner Information	Applicant/Contractor Information	
Project Address	General Contractor (Co. Name)	
Lot Block Subdivision	Applicant Name	
_____	Applicant Email	
Name of property owner	Applicant Phone	
Address of property owner	Field contact person (if different than above)	
City / State / Zip	Cell phone:	

Permit Type	Notes
<input type="checkbox"/> Approach/Culvert/Paving	All inspections by Public Works. Min. culvert size - 18 inch RCP
<input type="checkbox"/> Construction/Sales Trailer	Removal required upon completion of project
<input type="checkbox"/> Demolition	Trees located on site must be protected and inspected
<input type="checkbox"/> Temporary Storage/POD	Not permitted in right-of-way
<input type="checkbox"/> Roofing	Reroofing of existing structure
<input type="checkbox"/> Tent	Permit for tents 400 square feet or greater
<input type="checkbox"/> Other _____	Must comply with applicable ordinances and codes

Applicant Signature	
Printed Name:	Signature:

Office Use Only	\$Fees
Contractor Status	Building Permit Fee _____
Expired Permits <input type="checkbox"/> yes <input type="checkbox"/> no	Plan Review Fee _____
Plans Examiner	Contractor Reg.Fee _____
Permit Number	Other _____
	Other _____
	Total Due _____