



**BUILDING PERMIT**  
**APPLICATION**

**Instructions:** Please complete the application and include the total cost of labor and materials. A \$20.00 application fee is included for all building permits. *Permits are valid for six (6) months.*

**APPLICANT INFORMATION**

- General Contractor     Property Owner     Lessee     Agent

Applicant Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_

**CONTRACTOR INFORMATION**

Business Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
COH Contractor License #: \_\_\_\_\_ Email: \_\_\_\_\_  
Are subcontractors working on this project:     Yes     No

**PROPERTY INFORMATION**

Property Owner: \_\_\_\_\_ Phone: \_\_\_\_\_  
Property Address: \_\_\_\_\_ Email: \_\_\_\_\_  
Rental Property:     Yes     No

**PERMIT INFORMATION**

- |  |                                     |  |                                     |
|--|-------------------------------------|--|-------------------------------------|
| <input type="checkbox"/> New Construction      | <input type="checkbox"/> Demolition | Residential:                           |                                     |
| <input type="checkbox"/> Renovation            | <input type="checkbox"/> Excavation | <input type="checkbox"/> Single Family | <input type="checkbox"/> Commercial |
| <input type="checkbox"/> Addition / Alteration | <input type="checkbox"/> Repair     | <input type="checkbox"/> Multi-family  | <input type="checkbox"/> Industrial |

**Total Cost of Labor and Materials:** \$ \_\_\_\_\_

**DESCRIPTION OF WORK**

- Electric     Plumbing     HVAC     Framing     Roofing     Other

Description of Work: \_\_\_\_\_  
Square footage of Structure: \_\_\_\_\_  
Square footage of site: \_\_\_\_\_

**OTHER PERMITS**

- Certificate of Occ     Sign     Right-of-way     Special privilege     Floodplain

**Article 1705.99 Providing false, incomplete, or misleading information on this application is subject to a \$500 fine.**

**Building Permit Fee:** \$ \_\_\_\_\_  
**Application Fee:** \$ 20.00  
**Total:** \$ \_\_\_\_\_

I acknowledge that the above information is true and correct to the best of my knowledge, and I agree to comply with all state, county, and city codes and ordinances.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / 20\_\_\_\_  
Technician/Inspector: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / 20\_\_\_\_