

Residential Permit Application

| Project | Inform | ation: |
|---------|--------|--------|
| , | | |

| BV#: | Valuation (\$): | |
|------------------------------|--|-------------------|
| Project Address: | | |
| | Square Foot: | |
| | RSFR REMODEL/ADDITIONPLUMB | |
| ACCESSORY BUILDING | ELETRICAL SWIMMING POOL | OTHER |
| Description of work: | | Number of stores: |
| Area Square Feet: Living: | Garage: Covered Porch: | Total: |
| IS THIS PROPERTY IN A FLOODF | PLAIN: Yes NO if yes, provide Flood Pl | ain Certificate |
| | | |

Owner Information:

| Name: | | Contact Person: | |
|----------|--------|-----------------|--|
| Address: | | | |
| Phone #: | _Cell# | Email: | |

Contractor Information:

| General Contractor: | Contract Person | Phone # | Email |
|------------------------|-----------------|---------|-------|
| Mechanical Contractor: | Contract Person | Phone # | Email |
| Electrical Contractor: | Contract Person | Phone # | Email |
| Plumbing Contractor: | Contract Person | Phone # | Email |

A permit becomes null and void if work or construction authorized is not commenced within 180 days, or if construction or work is suspended or abandoned for a period of 180 days at any time after work is commenced. All permits require a final inspection.

It shall be unlawful to use or occupy or permit the use of occupancy of any building or premises created, erected, changed, converted, altered or enlarged in its use or structure until a Certificate of Occupancy shall have been issued by the administrative official.

I hereby certify that I have read examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state of local law regulating construction or the performance of construction.

| | | Total Permit Fees: | | |
|-----------------------------------|------------------------------|--------------------|-------------------------|--|
| Signature of Applicant: | Date: | | | |
| OFFICE USE ONLY: | | | | |
| | | | | |
| Approved by BV Inspector: | | Date Approved: | | |
| City of Santa Clara Receipt Date: | | | | |
| Application Notification Date | Applicant Receipt Signature: | | Applicant Receipt Date: | |