



**OFFICE USE**

<b>APPROVALS</b>	Subdivision _____				Zoning District _____						
	Plat Book _____ Page _____				Petition # _____						
Project # _____				Special Exception _____		Rezoning _____		Variance _____			
Future Land Use _____				Used Dwelling _____		Temporary Use _____		Other _____			
Zoning _____				SPMH # _____							
Inspection Area _____				Minimum Setbacks							
Parcel Comments _____				Front _____		Left _____		Right _____		Rear _____	
JUR SEC TWP RNG SUB BLOCK LOT				Proposed Setbacks							
_____				Front _____		Left _____		Right _____		Rear _____	
_____				Official Address _____							
<b>BUILDING CHARACTERISTICS</b>	Flood Zone _____			Type of Sewage Disposal				Type of Water Supply			
	Base Flood Elevation On File _____			<input type="checkbox"/> Public/Private Utility <input type="checkbox"/> Private Septic Tank Septic Tank No. _____				<input type="checkbox"/> Public/Private Utility <input type="checkbox"/> Private Well			
Occupancy Type			Mixed Occupancy			Construction Type			Area Modification		
Group _____			Separation Req. _____			Type _____			<input type="checkbox"/> Yes <input type="checkbox"/> No		
# Units _____			Principle Type Group _____			Protected <input type="checkbox"/>					
Dimensions			Accessory Type Group _____			Unprotected <input type="checkbox"/>					
Number of Stories _____						Sprinkler <input type="checkbox"/>					
Height _____											
Area _____											
<b>PERMITS ISSUED FOR</b>	Prefix		Type Code		Action Code		Description Code _____		Transaction # _____		
	<input type="checkbox"/> Building Residential <input type="checkbox"/> Building Commercial <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> Mechanical <input type="checkbox"/> Concrete <input type="checkbox"/> Temporary		<input type="checkbox"/> Primary <input type="checkbox"/> Sub <input type="checkbox"/> Sign Tag # _____ <input type="checkbox"/> Reference # _____		<input type="checkbox"/> Construct <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Demolition <input type="checkbox"/> Relocation <input type="checkbox"/> Manufactured <input type="checkbox"/> Installation		<input type="checkbox"/> Multiple Permit Application <input type="checkbox"/> Electrical <input type="checkbox"/> HVAC <input type="checkbox"/> Mechanical <input type="checkbox"/> Plumbing <input type="checkbox"/> Roofing <input type="checkbox"/> Excavation/Site Work <input type="checkbox"/> N. A.		Check # _____ Cash _____ Total Permit Fee \$ _____		
<b>SUPPLEMENTAL PERMIT REQUIREMENTS</b>	TYPE		REQ	AUTH Y N		DWG REQ	REV REQ	FEE REQ	PLAN REV FEE	NOC	
	#										
	ELECTRICAL										
	HVAC										
	PLUMBING										
	ROOFING										
	ALARM SYSTEM										
	FIRE SPRINKLER										
	FIRE SUPPRESSION										
	FUEL LINES										
	FUEL TANK										
	GAS										
	HVAC/DUCT										
	HVAC/HOOD										
	LOW VOLTAGE										
<b>ZONING APPROVAL:</b>						<b>BUILDING APPROVAL:</b>					