

## BUILDING PERMIT APPLICATION

Company	Phone
Project Manager	License Number
Facility/School	Date
Project Title	
Project Description	
Architect/Engineer	
PLEASE SUBMIT THE FOLLOWING DO 3 Complete sets of project drawings/spec A/E	OCUMENTS WITH THIS APPLICATION cifications: Signed and sealed by the
List Sub Contractors	License #

Signature of Applicant REQUIRED FOR PERMIT PICK UP