

Corporate Headquarters 5776 Stoneridge Mall Rd, Ste. 150 Pleasanton, CA 94588 (925) 463-0651 Fax: (925) 463-0691

PAONIA BUILDING PERMIT APPLICATION

Project Address:						Suite Application Dat		lication Date	
CONTRACTOR	Name	Name				□ Owner □ Contractor			
(APPLICANT)	Address		(City/State		p Phone			
PROPERTY OWNER	Name: Address		(City/State)	Phone		
ARCHITECT	Name: Address		(City/State)	Phone		
STRUCTURAL ENGINEER	Name: Address		(City/State		Phone			
PROJECT INFORMATION	□ Comme □ Resider		Project I	Description:					
PROJECT VALUATION	\$		Use:	Use:					
					Print Name of Owner				
Signature of Contractor or Authorized Agent Signature of Owner DO NOT WRITE BELOW THIS LINE									
Occupancy Classification(s)	Type of Const.	Floor Area	Height	Occ. Load	PERMIT NO.				
					Required Approvals				
ZONE Setbacks: Front RearSides Project Comments:					Building Structural Mechanical Plumbing	N/A	Req'd	Date/By	
Fees					Electrical				
Building Permit \$					Fire Dept.				
Plan Review Fee\$Total Fees\$					Zoning				
1010111008	φ								