| TAX PARCEL NO | PERMIT NO. | DATE: | , 2018 |
|----------------------------------------------------------------------------------------------|-----------------------|----------------------------------------------------|---------------------|
| | City of Ridge | land | |
| · | ICATION FOR BUI | | |
| Type of Permit: A. Erection or Construction | | D. Moving | |
| B. Repair or Alteration | | D. Moving E. Demolition or | Razina |
| C. Excavation or Site Work | | E. Demontion of | Razing |
| C. Excuvation of Site Work | | | |
| Type of Structure: | | | |
| New Residential Housekeeping B | | 324 Offices, banks, and p | |
| 101 Single-family house, detache | | 325 Public works and util | |
| 102 Single-family house, attached | d | 326 Schools and other ed | |
| 103 Two-family building | | 327 Stores and customer | |
| 104 Three- and four-family build | | 328 Other non-residential | _ |
| 105 Five-or-more family building | | 329 Structures other than | buildings |
| New Residential Non-housekeepi | ing Buildings | Additions, Alterations, a | and Conversions |
| 213 Hotels, motels, and tourist ca | - | 434 Residential (except g | |
| 214 Other non-housekeeping shell | lter | 437 Non-residential and r | on-housekeeping |
| | | 438 Additions of garages | and carports |
| New Non-residential Buildings | | | |
| 318 Amusement, social, and recre | | Demolitions and Razing of | |
| 319 Churches and other religious | | 645 Single family houses | |
| 320 Industrial | | 646 Two-family building | |
| 321 Parking garages |)#0.GOS | 647 Three- and four-fami | |
| 322 Service stations and repair ga323 Hospitals and institutional | irages | 648 Five-or-more family 649 All other buildings an | |
| 323 Hospitals and institutional | | 0+7 Mi ouici ouildings ai | id structures |
| Location: | | | |
| Street Address | | | |
| Lot NoBlock | | | |
| Square footage of building | Current zonin | <u> </u> | |
| Number of residential units Water meter size? | Sewer | tap needed? | |
| water meter size: | water Square | e footage for plan review | |
| Cost of Construction \$ | | e rootage for plan review | |
| | | | |
| If Commercial: | | N D I' | oc N |
| No. Electrical outlets No. Plumb | onig fixtures | No. Parking spaces MP | C No |
| Location in Flood Zones: | | | |
| A. Inside 100 year floodplain | | | |
| Flood Insurance Rate Map Par | nel Number | | |
| Base Flood Elevation | Lo | owest Floor Elevation | |
| FLOOD ELEVATION CER | | IRED | |
| B. Outside 100 year floodplain | | | |
| | | CONTRACTOR'S | DDEGG |
| OWNER'S NAME AND ADDRESS: | • | COMPANY NAME AND AD | |
| | | | |
| DI N | | DI N | |
| Phone No | | Phone No. | |
| SUBCONTRACTOR'S COMPANY | NAME AND SIGN | NATURE: PHONE NO. | |
| Electrical | | | |
| Plumbing | | | |
| Mechanical | | | |
| | | | |
| I hereby certify that I am the owner, or | | | |
| information set forth above is true and | | | |
| assessment and levy. I understate that | the building permit i | ssued pursuant to this application | on is valid for six |
| months after date of issuance. | | | |
| | | APPROVAL OF PER | MIT |
| Signature – Owner, Contractor, or Age | nt | | |
| | | | |
| Drinted or typed name of names significant | σ | _ | Date |
| Printed or typed name of person signin | ಕ | | |