

APPLICATION FOR BUILDING PERMIT
MADISON COUNTY INSPECTIONS



OWNER _____ DATE _____

MAILING ADDRESS _____ TELEPHONE _____

BUILDING LOCATION/DIRECTIONS _____

PIN NUMBER _____ ACREAGE _____ ZONING CLASSIFICATION _____

TOWN JURISDICTION: Y N TOWN APPROVALS : Y N TOWNSHIP: _____

OCCUPANCY: SINGLE FAMILY MULTI-FAMILY COMMERCIAL

TYPE OF WORK: NEW ADDITION RENOVATION CHANGE OF USE DEMOLITION REPAIR UPFIT

USE OF PROPERTY: OWNER OCCUPIED RENTAL SALE LIEN AGENT NUMBER: _____

PROJECT DESCRIPTION _____

TOTAL ESTIMATED COST OF PROJECT _____ NO. OF STORIES _____

CONSTRUCTION TYPE _____

LENGTH _____ WIDTH _____ # BEDROOMS _____ BATHROOMS _____

BASEMENT _____ CRAWL SPACE _____ SLAB _____ BASEMENT FINISHED YES _____ NO _____

DWELLING SQ. FT. _____ GARAGE SQ. FT. _____ TOTAL SQ. FT. _____

PERMIT COST: Bldg: _____ Zoning: _____ Total: _____

GENERAL CONTRACTOR _____ LICENSE NO. _____

Contact Number _____ Address _____

SUBCONTRACTORS:

ELECTRICAL CONTRACTOR _____ LICENSE NO. _____

Contact Number _____ Address _____

PLUMBING CONTRACTOR _____ LICENSE NO. _____

Contact Number _____ Address _____

MECHANICAL CONTRACTOR _____ LICENSE NO. _____

Contact Number _____ Address _____

GAS CONTRACTOR _____ LICENSE NO. _____

Contact Number _____ Address _____

The undersigned hereby certifies that he/she is the contractor and authorized agent of the owner and the above information is correct to the best of his/her knowledge and hereby makes application for a permit and inspection of work described above. All work will be done in accordance with all applicable State and local laws and regulations.

Signature _____ Date _____ Printed name _____

APPROVED BY: _____ DATE _____ PERMIT NUMBER: _____