

BUILDING PERMIT CHECKLIST

PROJECT NAME _____

DATE RECEIVED ___/___/___

CONTACT NAME _____

PHONE NUMBER _____ - _____

DEPARTMENT APPROVALS

DEPT.	APPROVED	DATE	SIGNATURE
ENGINEERING	YES/NO	___/___/___	_____
PLANNING	YES/NO	___/___/___	_____
BUILDING	YES/NO	___/___/___	_____
FIRE	YES/NO	___/___/___	_____

PERMIT SUBMITTALS

2 SETS OF PLANS [SIGN APPS. NEED 3 SETS] _____

STRUCT. ENG. [IF NEEDED] _____

MECH. CHECK _____

GAS PIPE DETAIL [SIZING] _____

SITE PLANS [WITH SETBACKS] _____