



CONSTRUCTION PERMIT

Date Issued _____
Permit # _____

IDENTIFICATION Block _____ Lot _____ Qualification Code _____
 Work Site Location _____ Contractor _____
 Address _____
 Owner in Fee _____ Tel. (_____) _____
 Address _____ Lic. No. or Bldrs. Reg. No. _____
 Tel. (_____) _____

Is hereby granted permission to perform the following work:

- BUILDING PLUMBING LEAD HAZARD ABATEMENT
 - ELECTRICAL FIRE PROTECTION DEMOLITION
 - ELEVATOR DEVICES ASBESTOS ABATEMENT OTHER _____
- (Subchapter 8 only)

DESCRIPTION OF WORK:

NOTE: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work \$ _____

Construction Official _____ Date _____

U.C.C. F170 (rev. 01/04) 1 WHITE—INSPECTOR 2 CANARY—OFFICE 3 PINK—TAX ASSESSOR 4 GOLD—APPLICANT (see reverse side)

PAYMENTS (Office Use Only)

Building _____
 Electrical _____
 Plumbing _____
 Fire Protection _____
 Elevator Devices _____
 Other _____
 DCA State Permit Fee _____
 Cert. of Occupancy _____
 Other _____
 Total _____
 Check No. _____
 Cash _____
 Collected by _____

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