



111 E. COMMERCIAL STREET
 WILLITS, CALIFORNIA 95490
 (707) 459-4601 TEL
 (707) 459-1562 FAX

DATE RECEIVED:

APPLICATION NUMBER:

**BUILDING PERMIT APPLICATION,
 ADDITION/ALTERATION TO EXISTING BUILDINGS**

This information is required pursuant to Section 19825 of the Health and Safety Code of the State of California.

PROJECT INFORMATION				
PROJECT ADDRESS:			APN:	
PROJECT DESCRIPTION:			ZONING:	
			PARCEL AREA:	
			LIVING AREA:	
			GARAGE AREA:	
TOTAL VALUE:			DECK AREA:	
OWNER INFORMATION				
NAME:				
ADDRESS:		CITY:	STATE:	ZIP:
PHONE:	CELL:	FAX:		
EMAIL:				
APPLICANT INFORMATION:				
NAME:				
ADDRESS:		CITY:	STATE:	ZIP:
PHONE:	CELL:	FAX:		
EMAIL:				
CONTRACTOR INFORMATION:				
NAME:				
ADDRESS:		CITY:	STATE:	ZIP:
PHONE:	CELL:	FAX:		
EMAIL:		CA. LIC #		
DESIGN PROFESSIONAL (Arch/Engineer)				
NAME:				
ADDRESS:		CITY:	STATE:	ZIP:
PHONE:	CELL:	FAX:		
EMAIL:		CA. LIC #		
SUBMITTAL REQUIREMENTS				
PLANS:	If project includes an addition to an existing structure, submit two (2) complete sets of plans and specifications. If the proposed project includes only non-structural, interior alterations the site plan and exterior elevations may be omitted. See Building Plan Submittal Requirement sheet attached.			
AQMD RELEASE:	Projects involving demolition of existing structures require an ASBESTOS DEMOLITION NOTIFICATION AND RELEASE FORM approved by the Mendocino County Air Quality Control District before permit is issued. See form (ADRN 2791) attached.			
_____			_____	
Signature of Owner / Agent			Date	

DEPARTMENT REVIEW

City Staff Use Only

PLANNING:

No Comments _____
(Dept) Signature Date

Comments/Conditions _____

(Dept) Signature Date

BUILDING:

No Comments _____
(Dept) Signature Date

Comments/Conditions _____

(Dept) Signature Date

PUBLIC WORKS:

No Comments _____
(Dept) Signature Date

Comments/Conditions _____

(Dept) Signature Date

SEWER:

No Comments _____
(Dept) Signature Date

Comments/Conditions _____

(Dept) Signature Date

WATER:

No Comments _____
(Dept) Signature Date

Comments/Conditions _____

(Dept) Signature Date

FIRE DISTRICT:

No Comments _____
(Dept) Signature Date

Comments/Conditions _____

(Dept) Signature Date

POLICE DEPT :

No Comments _____
(Dept) Signature Date

Comments/Conditions _____

(Dept) Signature Date

FEES

- Building Permit Application Fee, \$ _____
- Planning review, _____
- Sewer connection, _____
- Water connection, _____
- Building Permit, _____
- Grading Permit, _____
- Encroachment Permit, _____
- School Impact Fee, _____
- Building Standards Fee, _____