

TOWN OF ODESSA—APPLICATION FOR BUILDING PERMIT

JOB LOCATION _____ ZONING CLASSIFICATION _____ PERMIT # _____

TAX PARCEL NUMBER: _____ LOT _____ BLDG. _____ SUITE _____

No. _____ Street _____

Subdivision _____ Section _____ Code _____

IDENTIFICATION (Include Name, Address, Phone Number & Email Address for each entry)

APPLICANT	_____
	PHONE: _____ EMAIL: _____
PROPERTY OWNER (if not applicant)	_____
	PHONE: _____ EMAIL: _____
CONTRACTOR REG # _____ WAR. CO. _____	_____
	PHONE: _____ EMAIL: _____

DESCRIBE STRUCTURE & PROJECT: _____ (PLEASE ATTACH PLANS AND/OR SCOPE OF WORK)

APPROXIMATE VALUATION OF THE PROJECT _____

BUILDING AREA _____ sq. ft.
 TOTAL FLOOR AREA _____ sq. ft.

FOUNDATION	FRAMING
___ Slab on grade	___ Wood
___ Crawl space	___ Steel
___ Basement	___ Masonry
___ Other _____	___ Other _____

REQUIRED CERTIFICATE (s)

___ Elevator	___ Completion
___ Occupancy	___ None Required
___ Use	

REQUIRED ACCESSORY PERMITS

___ Electric	___ Sewer Connection
___ HVAC	___ Sewer Lateral
___ Plumbing	___ Other _____

PLAN REVIEW & APPROVAL RECORD

Ent / Exit _____	Plan Review _____
Fire Marshall _____	Rec. Plan _____
Hist. Review _____	Thermal _____
L & G / Site _____	Util. Disc. _____

INSPECTION FEES

Estimated Costs \$ _____

Building Permit Fee \$ _____

Certificate of Occupancy \$ _____

Electric Permit Fee \$ _____

HVAC Permit Fee \$ _____

Inspection Fee \$ _____

Mechanical Permit Fee \$ _____

Misc. Additional Fee \$ _____

Plan Review \$ _____

Plumbing Permit Fee \$ _____

Sewer Permit Fee \$ _____

Other \$ _____

TOTAL INSPECTION FEES: \$ _____

HOOK UP FEES

Electric _____	Sewer _____
Water _____	Other _____

I, the undersigned, own the above referenced property or am acting as an authorized agent of the owner.
APPLICANT OR OWNER SIGNATURE _____ **DATE** _____

BUILDING PERMIT #: _____
 DATE ISSUED: _____

TOTAL FEES DUE: \$ _____