APPLICATION DATE:		
EXPIRATION DATE:		

PERMIT NUMBER	

CITY OF WILLARD

Commercial Building Permit

Property Information

Subdivision:		
Section/Township/Range:		
Left Right Left Right TTACHED TO CONSTRUCTION DOCUMENTS		
Phone:		
Email:		
ontact Person:		
te, zip):		
ntact Person:		
te, zip):		
Business License #:		
Phone:		
Email:		
Business License #:		
Phone:		
Email:		
Business License #:		
Phone:		
Email:		
Business License #:		
Phone:		
Email:		

Structure Information	
Description of Work:	
Total Square Footage of Proposed Bu	uilding:
Total Cost of Project:	
Type of Construction (Use Group):	
Size of Water Meter:	
 Required Documentation and Two sets of construction dra Business License for Contract 	wings
understand the procedures, ordinand I also understand that this application the building inspector pursuant to a Furthermore, I acknowledge that I was by consultants of the city, certified in	provided on this application is true and correct; that I have read and ces, and requirements associated with the application and review process. on will expire within 180 days of the date of my signing, unless extended by written request for extension received prior to the expiration date. will be responsible for any, and all costs incurred by plan reviews performed nailing or publication costs for required legal notice, and recording fees. and reimbursed by the applicant upon invoicing.
Owner/Contractor:	Date: