



# Development Services Department

300 Richards Boulevard 3rd Floor Sacramento, CA 95811

Help Line: (916) 808-5656

www.cityofsacramento.org/dsd



## RESIDENTIAL PERMIT APPLICATION

Date: \_\_\_\_\_ Permit No. \_\_\_\_\_ Inspection Area: \_\_\_\_\_

<b>BUILDING SITE ADDRESS</b>		<b>SUITE #</b>
<b>ASSESSOR'S PARCEL #</b>		<b>COMMUNITY PLAN #</b>
<b>NAME OF APPLICANT</b>		<b>LICENSED CONTRACTOR</b> Lic No. # _____
Name _____		Name _____
Address _____		Address _____
City/State/Zip _____		City/State/Zip _____
Phone _____ FAX _____		Phone _____ FAX _____
E-mail: _____		E-mail: _____
<b>ARCHITECT/ENGINEER</b>		<b>PROPERTY OWNER</b>
Name _____		Name _____
Address _____		Address _____
City/State/Zip _____		City/State/Zip _____
Phone _____ FAX _____		Phone _____ FAX _____
E-mail: _____		E-mail: _____

No. of Stories	No. of Rooms	Roof Covering	Area 1 <sup>st</sup> Floor	Total Area	Garage area	Patio Area

**Applicable Disciplines:**

<input type="checkbox"/> Building	<input type="checkbox"/> Mechanical	<input type="checkbox"/> Plumbing	<input type="checkbox"/> Electrical	<input type="checkbox"/> Site	<input type="checkbox"/> Fire
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**Nature of the Work in Detail:**

**Job Valuation:**

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