



Community Development Department

BUILDING PERMIT RELEASE

Case Number _____

Date Submitted _____

DEPOSIT	\$275.00
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PROCESSING COSTS: The City operates on the basis of full cost recovery for the processing of planning projects. Deposits made at the time of application are projected to be sufficient for the processing of applications, however, additional deposits may be required to cover the costs for review of projects. If at any time deposits are insufficient to cover projected costs, processing of the project will be stopped until sufficient additional funds are deposited with the City. Lack of sufficient funds on deposit will suspend any required processing time frames.

Applicant/Contact Person: _____ Company: _____

Telephone No. (____) _____ Fax No. (____) _____ E-mail: _____

Mailing Address: _____
STREET CITY STATE ZIP

Owner /Contact Person: _____ Company: _____

Telephone No. (____) _____ Fax No. (____) _____ E-mail: _____

Mailing Address: _____
STREET CITY STATE ZIP

Project Case # (Tract Map #, LDP #, etc.): _____

Phase and Lot #'s (if applicable): _____

Address of Site: _____

Assessors Parcel Number(s): _____

Required With Application:

- a) Two (2) sets of the Precise Grading Plans or Site Plans with dimensioned setbacks
- b) Two (2) sets of the Architectural Elevations

Certification: I hereby certify that I understand the information regarding deposits for processing costs, information, and requirements referenced in this application, and that the information furnished above and in any attached exhibits is true and correct.

Applicant's Signature Date

Applicant's Printed Name

FOR OFFICE USE ONLY

Building Department Condition Compliance Release Signed by:

Planner Date