

## ADDENDUM TO PERMIT APPLICATION

(Production Residential Applications)

| APPLICATION DATE  | DUE DATE                           | ACCEPTED BY     | SITE P   | LAN APPROVAL   |           |  |   |  |  |  |  |
|---|------------------------------------|-----------------|--|--|-----------|--|---|--|--|--|--|
|   | □ 10 S.P. # □with SPA □without SPA |                 |  |  |           |  |   |  |  |  |  |
| day/mth/yr  | Not applicable (attached           |                 |  | s. Rec'd   |           |  |   |  |  |  |  |
| APPLICATION NO.   | acknowledgement)                   |                 |  |  |           |  |   |  |  |  |  |
|   |                                    |                 |  | ate  |           |  |   |  |  |  |  |
| A. PROJECT INFORMATION  |                                    |                 |  |  |           |  |   |  |  |  |  |
| OWNER (legal)   |                                    |                 |  |  |           |  |   |  |  |  |  |
| BUILDER (umbrella)  |                                    |                 |  |  |           |  |   |  |  |  |  |
| CONTRACTOR  | Name:                              |                 |  |  |           |  |   |  |  |  |  |
|   | Address:                           |                 |  |  |           |  |   |  |  |  |  |
|   | #                                  |                 |  | street   |           | cit  | у   |  |  |  |  |
|   | Name:                              |                 |  |  |           |  |   |  |  |  |  |
| APPLICANT/AGENT       Phone (Off):       (Cell):                                    |                                    |                 |  | (Fax):   | (Fax):    |  |   |  |  |  |  |
|   | Email:                             |                 |  |  |           |  |   |  |  |  |  |
| B. PLANS REVIEW CIRCULATION   |                                    |                 |  |  |           |  |   |  |  |  |  |
|   |                                    |                 |  |  |           |  |   |  |  |  |  |
| ZONING REVIEWED BY:   | STRUCT. REVIEWED BY:               | PLMB REVIEWED B | BY:  | HVAC REVIEWED BY:  | PERM      | IIT EXP. VAL   | DATION:                                   |  |  |  |  |
| Signature   | Signature                          | Signature       |  | Signature  | Signature |  |   |  |  |  |  |
| Date  | Date                               | Date            |  | Date   | Date      |  |   |  |  |  |  |
| COMMENTS  |                                    |                 |  |  | (         | Complete   | Initial                                   |  |  |  |  |
|   |                                    |                 |  |  |           |  |   |  |  |  |  |
|   |                                    |                 |  |  |           |  |   |  |  |  |  |
|   |                                    |                 |  |  |           |  |   |  |  |  |  |
|   |                                    |                 |  |  |           |  |   |  |  |  |  |
| Application must not be forwarded for issuance until all comments have been cleared |                                    |                 |  |  |           |  |   |  |  |  |  |
| C. FEES   |                                    |                 |  |  |           |  |   |  |  |  |  |
| Permit Fee Calculation  |                                    |                 |  |  |           |  | APPLICATION INITIAL FEE/DEPOSIT <u>\$</u> |  |  |  |  |
| Permit Fee Calculation  |                                    |                 |  |  |           | \$   |   |  |  |  |  |
|   | = \$                               |                 | RECEIP   |  | CE        | <u>\$</u>  |   |  |  |  |  |
|   | =\$                                |                 | RECEIP   | T # -<br>E OWING AT PERMIT ISSUANC   |           |  |   |  |  |  |  |
|   | =\$                                |                 | RECEIP<br>BALANC<br>Permit F   | Τ#-  |           |  |   |  |  |  |  |
|   | =\$                                |                 | RECEIP   | T # -<br>E OWING AT PERMIT ISSUANC<br>ee Balance   |           |  |   |  |  |  |  |
|   | =\$                                |                 | RECEIP<br>BALANC<br>Permit F<br>Copies   | T # -<br>E OWING AT PERMIT ISSUANC<br>ee Balance   |           | <u>\$</u>  |   |  |  |  |  |
| Deposit of \$1500.00 X  | =\$                                |                 | RECEIP<br>BALANC<br>Permit F<br>Copies<br>Overtime<br>Other<br>TOTAL E                             | T # -<br>E OWING AT PERMIT ISSUANC<br>ee Balance<br>e<br>BALANCE OWING                                   |           | <u>\$</u>  |   |  |  |  |  |
| Deposit of \$1500.00 X<br>Development Charge Receipt                                |                                    | _               | RECEIP<br>BALANC<br>Permit F<br>Copies<br>Overtime<br>Other<br>TOTAL E<br>RECEIP                   | T # -<br>E OWING AT PERMIT ISSUANC<br>ee Balance<br>e<br>BALANCE OWING                                   |           | \$<br>\$<br>\$<br>\$   |   |  |  |  |  |
| Deposit of \$1500.00 X Development Charge Receipt D. APPLICANT NOT                  | #<br>IFIED OF FEES OWING           |                 | RECEIP<br>BALANC<br>Permit F<br>Copies<br>Overtime<br>Other<br>TOTAL E<br>RECEIP                   | T # - CE OWING AT PERMIT ISSUANC ee Balance BALANCE OWING T # - MITS ISSUED & APPLIC                     | CANT      | \$<br>\$<br>\$<br>\$<br>\$<br>\$<br>\$<br>\$<br>\$<br>\$<br>\$<br>\$<br>\$<br>\$<br>\$<br>\$<br>\$<br>\$<br>\$ |   |  |  |  |  |
| Deposit of \$1500.00 X Development Charge Receipt D. APPLICANT NOT                  | #                                  | <br>. Da        | RECEIP<br>BALANC<br>Permit F<br>Copies<br>Overtime<br>Other<br>TOTAL E<br>RECEIP<br>E. PERI        | T # -<br>E OWING AT PERMIT ISSUANC<br>ee Balance   | CANT      | \$<br>\$<br>\$<br>\$<br>\$<br>\$<br>\$<br>\$<br>\$<br>\$<br>\$<br>\$<br>\$<br>\$<br>\$<br>\$<br>\$<br>\$<br>\$ |   |  |  |  |  |
| Deposit of \$1500.00 X Development Charge Receipt D. APPLICANT NOT Date             | #<br>IFIED OF FEES OWING<br>By     | <br>. Da        | RECEIP<br>BALANC<br>Permit F<br>Copies<br>Overtime<br>Other<br>TOTAL E<br>RECEIP<br>E. PERN<br>ate | T # -<br>E OWING AT PERMIT ISSUANC<br>ee Balance<br>BALANCE OWING<br>T # -<br>MITS ISSUED & APPLIC<br>By | CANT      | <u>\$</u><br><u>\$</u><br><u>\$</u><br><u>\$</u><br><u>\$</u><br><u>\$</u>                                     |   |  |  |  |  |