

CITY OF BURLINGAME APPLICATION FOR STRUCTURE BUILDING PERMIT

RETURN COMPLETED FORM TO CITY HALL 1 WEEK BEFORE 2ND WEDNESDAY OF THE MONTH. (When approved by applicable officials, permit issued by City Clerk)

Application Date:	Telephone Num	ıber:	
Property Owner:			
Street Address & Legal Description:			
Name of Contractor:	Contr.'s City License No.:		
ZONING DISTRICT: [] Single Family [] Commercial		[] Mobile/Manufactured	
TYPE OF WORK TO BE DONE: [] New Fence [] New Sign	[] New Structure [] New Retaining Wall	[] Structure Remodeling [] Structure Relocation	
TYPE OF STRUCTURE: [] House [] Other		ed [] Patio/Deck	
DETAIL INFORMATION : No. of Stories Heating Cooling Exte	s No. of Rooms _ erior Finish	No. of Baths Basement	
Project start/finish date:/ Project Estimated Cost: _		nated Cost:	
APPROVED BY:	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
Planning Commission Chairman:		Date:	
Building Inspector:		Date:	
City Administrator:		Date:	
Fire Chief (when required):		Date:	
PERM The above application has been approved b \$is acknowledged.	IIT NOy the appropriate official and r	eceipt of the fee in the amount of	

BEFORE YOU DIG, CALL 811

City Clerk

Date

APPLICATION TO BE CONSIDERED, SHOW THE FOLLOWING INFORMATION IN TH N ABOVE:	HE SITE
Northerly Direction and Corner Lot	
2. Name of Streets or Avenues and alleyway	
3. Length of lot4. Distance in feet from buildings to the lot line	
5. Distance in feet between ALL buildings	
6. Dimensions of all structures	
Ty City Hall (654-2414) when inspections are needed for layout of building, foundations and for rical wiring, gas connections, water connections and/or sewer connections.	otings,
MUST BE SIGNED AT CITY HALL	_
 Applicant Signature	