



# Commercial Building Permit

(DO NOT FAX OR E-MAIL APPLICATION)



PLEASE PRINT CLEARLY

ArlingtonPermits.com  
THE ONE START CENTER

Applicant's Name\*: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

\*A legible copy of a current government photo ID is required to be submitted by the applicant.

Project Address: \_\_\_\_\_ Suite: \_\_\_\_\_

Please check only one:

- Assembly** (Theater, restaurant, night club, dance club, banquet hall, indoor arcade, church and indoor/outdoor sport complex and similar uses)
- Business** (Business offices, bank/credit union, barber/beauty shop, medical offices, take out food establishments, professional services (CPAs, attorneys, architect/engineer etc) and similar uses)
- Educational** (Public or private school through the 12th grade, child care for more than 5 children over the age of 2 1/2 years of age)
- Factory** (Manufacturing, assembly/disassembly, fabricating, finishing, packaging, repair or processing of products or goods)

- High Hazard** (Use of any building involving materials or products that constitute a health, fire, explosion or toxic health hazard)
- Institutional** (Hospitals, nursing homes, assisted living facilities, day care other than educational and similar uses)
- Mercantile** (Retail/wholesale stores, gas stations, department stores and similar uses)
- Residential** (Hotel/motel, apartments (3 or more dwelling units), dormitories and similar uses)
- Storage** (Warehousing/storage of products, goods or materials)
- Utility & Miscellaneous** (Cell towers, barns, carports and other miscellaneous structures)

**Please circle only one:**

- New Constructon & Shell \*
- Addition\*
- Remodel/Alteration/Repair\*
- Early Grading (Only complete page 1 of this application)\*
- Interior Finish\*
- Move\*
- Demolition\*

\*If you are applying for **New Construction**, **New Construction-Shell**, **Addition** or **Early Grading** then you must first have an approved **Commercial site Plan**.

**All permits, except demolition permits, require a separate application for each building.**

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local ordinances regulating construction, the performance of construction or the use of any land or buildings.

Before a permit may be issued, electronic documents of accepted construction plans must be provided. The city is able to scan your documents for a fee; or, you may provide those electronic documents in the specified format. If you supply the electronic documents, they must be verified as accurate before a permit may be issued. Please check one:

- I authorize City staff to scan and charge applicable scanning fees
- I will provide the electronic documents in TIFF 300 dpi format

Signature of Permit Applicant \_\_\_\_\_ Date \_\_\_\_\_

If applicant is contractor, list name of company: \_\_\_\_\_

- Provide a Description of Proposed Work: \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**STAFF USE ONLY**

Plans Examiner: \_\_\_\_\_ Date: \_\_\_\_\_ Number of Sheets: \_\_\_\_\_

**1. NEW CONSTRUCTION & NEW SHELL BUILDINGS PERMITS ONLY**

- Total building square footage (all floors/levels): \_\_\_\_\_ square feet
- Construction Valuation-Declared: \$ \_\_\_\_\_
- TDLR Registration Number \_\_\_\_\_ (Required /declared construction value/ \$50,000 or greater)
- Building Permit Fee Valuation \$ \_\_\_\_\_ (Enter amount from worksheet)
- Will this space be used as a medical office? .....  YES  NO
- Will this facility be providing supervision for thirteen (13) or more unrelated children under the age of fourteen (14) for periods of time less than 24 hours? .....  YES  NO
- Will food or beverages be manufactured, packaged, stored, distributed, sold, or prepared, excluding vending machines? .....  YES  NO
- Will a septic tank, grease trap or sand trap be used on the premises? .....  YES  NO
- Will any manufacturing take place on the Premises? .....  YES  NO
- Will any liquid wastes or sludge be generated which are not disposed of in the sewer system? .....  YES  NO
- Will any form of waste water pre-treatment be utilized at location? .....  YES  NO
- Energy Code Compliance (Check only one-must attach compliance forms) :  
 ASHRAE 90.1;  IECC;  COMcheck w/ASHRAE;  COMcheck w/IECC;  Other
- Number of stories: \_\_\_\_\_
- Will the plan review be performed by a Third Party Organization? .....  YES  NO
- Will the inspections be performed by a Third Party Organization? .....  YES  NO
- Name of the Third Party Organization (Check only one):  
 Bureau Veritas  Code Solutions  Metro Code Analysis  
 Winston Services  None – Not Applicable
- Will/does this location have Gas Service? .....  YES  NO
- If a multi-family or hotel/motel use, how many dwelling or sleeping units will be constructed? \_\_\_\_\_

**MAIN USE (Must select one use from the list below)**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Amenity Center  | <input type="checkbox"/> Dormitory                            | <input type="checkbox"/> Post Office                                    |
| <input type="checkbox"/> Amusement Park  | <input type="checkbox"/> Fabricating                          | <input type="checkbox"/> Professional Services (CPA, Attorney, etc.)    |
| <input type="checkbox"/> Animal Hospital   | <input type="checkbox"/> Finishing                            | <input type="checkbox"/> Repair/Processing                              |
| <input type="checkbox"/> Apartments (3+ dwelling units)  | <input type="checkbox"/> Fire Station                         | <input type="checkbox"/> Restaurant                                     |
| <input type="checkbox"/> Assembly/Disassembly  | <input type="checkbox"/> Fitness Center                       | <input type="checkbox"/> Retail/Wholesale Store                         |
| <input type="checkbox"/> Assisted Living Facility  | <input type="checkbox"/> Fraternity/Sorority House            | <input type="checkbox"/> Retaining Wall                                 |
| <input type="checkbox"/> Auto Lube Center  | <input type="checkbox"/> Funeral Home                         | <input type="checkbox"/> Retirement Community                           |
| <input type="checkbox"/> Automobile Sales  | <input type="checkbox"/> Gas Station                          | <input type="checkbox"/> School (ISD)                                   |
| <input type="checkbox"/> Automotive Repair Garage  | <input type="checkbox"/> Golf Course/Tennis Court             | <input type="checkbox"/> School (Other than ISD) through the 12th Grade |
| <input type="checkbox"/> Bank/Credit Union   | <input type="checkbox"/> Hospital                             | <input type="checkbox"/> Take Out Food Establishment                    |
| <input type="checkbox"/> Banquet Hall  | <input type="checkbox"/> Hotel/Motel                          | <input type="checkbox"/> Theater  |
| <input type="checkbox"/> Barber/Beauty Shop  | <input type="checkbox"/> Indoor Arcade                        | <input type="checkbox"/> Tower  |
| <input type="checkbox"/> Barn  | <input type="checkbox"/> Indoor/Outdoor Sports Complex        | <input type="checkbox"/> Undetermined Use (Shell Buildings Only)        |
| <input type="checkbox"/> Bldg w/Materials that Constitute a Health, Explosion, Fire or Toxic Health Hazard | <input type="checkbox"/> Junior/Community College/ University | <input type="checkbox"/> Unmanned Utility/ Existing Site                |
| <input type="checkbox"/> Business Office   | <input type="checkbox"/> Library                              | <input type="checkbox"/> Utility  |
| <input type="checkbox"/> Car Wash (Auto/Self-service)  | <input type="checkbox"/> Manufacturing                        | <input type="checkbox"/> Veterinarian Clinic                            |
| <input type="checkbox"/> Carports  | <input type="checkbox"/> Medical Office                       | <input type="checkbox"/> Warehouse Distribution                         |
| <input type="checkbox"/> Child Care for 5+ children over the age of 2.5 yrs                                | <input type="checkbox"/> Mini-Warehouse                       | <input type="checkbox"/> Warehousing/Storage                            |
| <input type="checkbox"/> Church  | <input type="checkbox"/> Night Club                           |   |
| <input type="checkbox"/> Convenience Store with Gas Pumps  | <input type="checkbox"/> Nursing Home                         |   |
| <input type="checkbox"/> Dance Club  | <input type="checkbox"/> Packaging                            |   |
| <input type="checkbox"/> Day Care - Not Educational  | <input type="checkbox"/> Park                                 |   |
| <input type="checkbox"/> Day Surgery   | <input type="checkbox"/> Parking Garage                       |   |
| <input type="checkbox"/> Department Store  | <input type="checkbox"/> Photography Studio                   |   |

**2. ADDITION PERMITS ONLY**

- Construction Valuation-Declared: \$ \_\_\_\_\_
- TDLR Registration Number \_\_\_\_\_ *(Required if declared construction value is \$50,000 or greater)*
- Building Permit Fee Valuation \$ \_\_\_\_\_ *(Enter amount from worksheet)*
- Total Square Feet of Addition including all Floor Levels: \_\_\_\_\_
- Proof of Asbestos Survey Provided: .....  YES  NO
- Will this space be used as a medical office? .....  YES  NO
- Will this facility be providing supervision for thirteen (13) or more unrelated children under the age of fourteen (14) for periods of time less than 24 hrs? .....  YES  NO
- Will food or beverages be manufactured, packaged, stored, distributed, sold, or prepared, excluding vending machines? .....  YES  NO
- Will a septic tank, grease trap or sand trap be used on the premises?  YES  NO
- Will any manufacturing take place on the Premises? .....  YES  NO
- Will liquid wastes or sludge be generated which are not disposed of in the sewer system .....  YES  NO
- Will any form of waste water pre-treatment be utilized at location? .....  YES  NO
- Energy Code Compliance (Check only one-must attach compliance forms):  
 ASHRAE 90.1:  IECC:  COMcheck w/ASHRAE:  COMcheck:  Other
- Number of stories in addition: \_\_\_\_\_
- Will the plan review be performed by a Third Party Organization? .....  YES  NO
- Will the inspections be performed by a Third Party Organization? .....  YES  NO
- Name of the Third Party Organization (Check only one):  
 Bureau Veritas;  Code Solutions;  Metro Code Analysis;  Winston Services;  None - N/A
- Will/does this location have Gas Service? .....  YES  NO
- If a multi-family or hotel/motel use, how many dwelling or sleeping units are being added? \_\_\_\_\_
- If a multi-family or hotel/motel use, the total number of dwelling or sleeping units at completion? \_\_\_\_\_

**MAIN USE (Must select one use from the list below)**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Amenity Center  | <input type="checkbox"/> Dormitory                            | <input type="checkbox"/> Post Office                                    |
| <input type="checkbox"/> Amusement Park  | <input type="checkbox"/> Fabricating                          | <input type="checkbox"/> Professional Services (CPA, Attorney, etc.)    |
| <input type="checkbox"/> Animal Hospital   | <input type="checkbox"/> Finishing                            | <input type="checkbox"/> Repair/Processing                              |
| <input type="checkbox"/> Apartments (3+ dwelling units)  | <input type="checkbox"/> Fire Station                         | <input type="checkbox"/> Restaurant                                     |
| <input type="checkbox"/> Assembly/Disassembly  | <input type="checkbox"/> Fitness Center                       | <input type="checkbox"/> Retail/Wholesale Store                         |
| <input type="checkbox"/> Assisted Living Facility  | <input type="checkbox"/> Fraternity/Sorority House            | <input type="checkbox"/> Retaining Wall                                 |
| <input type="checkbox"/> Auto Lube Center  | <input type="checkbox"/> Funeral Home                         | <input type="checkbox"/> Retirement Community                           |
| <input type="checkbox"/> Automobile Sales  | <input type="checkbox"/> Gas Station                          | <input type="checkbox"/> School (ISD)                                   |
| <input type="checkbox"/> Automotive Repair Garage  | <input type="checkbox"/> Golf Course/Tennis Court             | <input type="checkbox"/> School (Other than ISD) through the 12th Grade |
| <input type="checkbox"/> Bank/Credit Union   | <input type="checkbox"/> Hospital                             | <input type="checkbox"/> Take Out Food Establishment                    |
| <input type="checkbox"/> Banquet Hall  | <input type="checkbox"/> Hotel/Motel                          | <input type="checkbox"/> Theater  |
| <input type="checkbox"/> Barber/Beauty Shop  | <input type="checkbox"/> Indoor Arcade                        | <input type="checkbox"/> Tower  |
| <input type="checkbox"/> Barn  | <input type="checkbox"/> Indoor/Outdoor Sports Complex        | <input type="checkbox"/> Undetermined Use (Shell Buildings Only)        |
| <input type="checkbox"/> Bldg w/Materials that Constitute a Health, Explosion, Fire or Toxic Health Hazard | <input type="checkbox"/> Junior/Community College/ University | <input type="checkbox"/> Unmanned Utility/ Existing Site                |
| <input type="checkbox"/> Business Office   | <input type="checkbox"/> Library                              | <input type="checkbox"/> Utility  |
| <input type="checkbox"/> Car Wash (Auto/Self-service)  | <input type="checkbox"/> Manufacturing                        | <input type="checkbox"/> Veterinarian Clinic                            |
| <input type="checkbox"/> Carports  | <input type="checkbox"/> Medical Office                       | <input type="checkbox"/> Warehouse Distribution                         |
| <input type="checkbox"/> Child Care for 5+ children over the age of 2.5 yrs                                | <input type="checkbox"/> Mini-Warehouse                       | <input type="checkbox"/> Warehousing/Storage                            |
| <input type="checkbox"/> Church  | <input type="checkbox"/> Night Club                           |   |
| <input type="checkbox"/> Convenience Store with Gas Pumps  | <input type="checkbox"/> Nursing Home                         |   |
| <input type="checkbox"/> Dance Club  | <input type="checkbox"/> Packaging                            |   |
| <input type="checkbox"/> Day Care - Not Educational  | <input type="checkbox"/> Park                                 |   |
| <input type="checkbox"/> Day Surgery   | <input type="checkbox"/> Parking Garage                       |   |
| <input type="checkbox"/> Department Store  | <input type="checkbox"/> Photography Studio                   |   |

**3. REMODEL/ALTERATION/REPAIR PERMITS ONLY**

- Project Scope: (check only one):
  - Foundation Repair Only
  - Remodel including Exterior Façade Work
  - Roof Replacement Only
  - Antenna Co-Locate on Cell Tower
  - All others not described
- Construction Valuation-Declared: \$ \_\_\_\_\_
- TDLR Registration Number \_\_\_\_\_ (Required if declared construction value is \$50,000 or greater)
- Building Permit Fee Valuation: \$ \_\_\_\_\_ (Enter amount from worksheet)
- Area of Tenant Space in Square Feet \_\_\_\_\_
- Proof of Asbestos Survey .....  YES  NO
- Will this space be used as a medical office?  YES  NO
- Change of Use of building:  YES  NO
- Will this facility be providing supervision for thirteen (13) or more unrelated children under the age of fourteen (14) for periods of time less than 24 hrs?  YES  NO
- Will food or beverages be manufactured, packaged, stored, distributed, sold, or prepared, excluding vending machines?  YES  NO
- Will a septic tank, grease trap or sand trap be used on the premises?  YES  NO
- Will any manufacturing take place on the Premises?  YES  NO
- Will liquid waste or sludge be generated and disposed of in the sewer system?  YES  NO
- Will any form of waste water pre-treatment be utilized at this location?  YES  NO
- Energy Code Compliance (check only one-must attach compliance forms)
  - ASHRAE 90.1;  IECC;  COMcheck w/ASHRAE;  COMcheck w/IECC;  Other
- Number of stories: \_\_\_\_\_
- Will the plan review be performed by a Third Party Organization?  YES  NO
- Will the inspections be performed by a Third Party Organization?  YES  NO
- Name of the Third Party Organization (Check only one):
  - Bureau Veritas
  - Code Solutions
  - Metro Code Analysis
- Will/does this location have Gas Service? .....  YES  NO

**MAIN USE (Must select one use from the list below)**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Amenity Center  | <input type="checkbox"/> Dormitory                            | <input type="checkbox"/> Post Office                                    |
| <input type="checkbox"/> Amusement Park  | <input type="checkbox"/> Fabricating                          | <input type="checkbox"/> Professional Services (CPA, Attorney, etc.)    |
| <input type="checkbox"/> Animal Hospital   | <input type="checkbox"/> Finishing                            | <input type="checkbox"/> Repair/Processing                              |
| <input type="checkbox"/> Apartments (3+ dwelling units)  | <input type="checkbox"/> Fire Station                         | <input type="checkbox"/> Restaurant                                     |
| <input type="checkbox"/> Assembly/Disassembly  | <input type="checkbox"/> Fitness Center                       | <input type="checkbox"/> Retail/Wholesale Store                         |
| <input type="checkbox"/> Assisted Living Facility  | <input type="checkbox"/> Fraternity/Sorority House            | <input type="checkbox"/> Retaining Wall                                 |
| <input type="checkbox"/> Auto Lube Center  | <input type="checkbox"/> Funeral Home                         | <input type="checkbox"/> Retirement Community                           |
| <input type="checkbox"/> Automobile Sales  | <input type="checkbox"/> Gas Station                          | <input type="checkbox"/> School (ISD)                                   |
| <input type="checkbox"/> Automotive Repair Garage  | <input type="checkbox"/> Golf Course/Tennis Court             | <input type="checkbox"/> School (Other than ISD) through the 12th Grade |
| <input type="checkbox"/> Bank/Credit Union   | <input type="checkbox"/> Hospital                             | <input type="checkbox"/> Take Out Food Establishment                    |
| <input type="checkbox"/> Banquet Hall  | <input type="checkbox"/> Hotel/Motel                          | <input type="checkbox"/> Theater  |
| <input type="checkbox"/> Barber/Beauty Shop  | <input type="checkbox"/> Indoor Arcade                        | <input type="checkbox"/> Tower  |
| <input type="checkbox"/> Barn  | <input type="checkbox"/> Indoor/Outdoor Sports Complex        | <input type="checkbox"/> Undetermined Use (Shell Buildings Only)        |
| <input type="checkbox"/> Bldg w/Materials that Constitute a Health, Explosion, Fire or Toxic Health Hazard | <input type="checkbox"/> Junior/Community College/ University | <input type="checkbox"/> Unmanned Utility/ Existing Site                |
| <input type="checkbox"/> Business Office   | <input type="checkbox"/> Library                              | <input type="checkbox"/> Utility  |
| <input type="checkbox"/> Car Wash (Auto/Self-service)  | <input type="checkbox"/> Manufacturing                        | <input type="checkbox"/> Veterinarian Clinic                            |
| <input type="checkbox"/> Carports  | <input type="checkbox"/> Medical Office                       | <input type="checkbox"/> Warehouse Distribution                         |
| <input type="checkbox"/> Child Care for 5+ children over the age of 2.5 yrs                                | <input type="checkbox"/> Mini-Warehouse                       | <input type="checkbox"/> Warehousing/Storage                            |
| <input type="checkbox"/> Church  | <input type="checkbox"/> Night Club                           |   |
| <input type="checkbox"/> Convenience Store with Gas Pumps  | <input type="checkbox"/> Nursing Home                         |   |
| <input type="checkbox"/> Dance Club  | <input type="checkbox"/> Packaging                            |   |
| <input type="checkbox"/> Day Care - Not Educational  | <input type="checkbox"/> Park                                 |   |
| <input type="checkbox"/> Day Surgery   | <input type="checkbox"/> Parking Garage                       |   |
| <input type="checkbox"/> Department Store  | <input type="checkbox"/> Photography Studio                   |   |

**4. INTERIOR FINISH PERMIT ONLY**

- Construction Valuation Declared: \$ \_\_\_\_\_
- TDLR Re-registration Number \_\_\_\_\_
- Building Permit Fee Valuation \$ \_\_\_\_\_ *(Enter amount from worksheet)*
- Area of Tenant Space in Square Feet \_\_\_\_\_
- Proof of Asbestos Survey .....  YES  NO
- Will this space be used as a medical office? .....  YES  NO
- Will this facility be providing supervision for thirteen (13) or more unrelated children under the age of fourteen (14) for periods of time less than 24? .....  YES  NO
- Will food or beverages be manufactured, packaged, stored, distributed, sold, or prepared, excluding vending machines?  YES  NO
- Will a septic tank, grease trap or sand trap be used on the premises?  YES  NO
- Will any manufacturing take place on the Premises? .....  YES  NO
- Will liquid wastes or sludge be generated and disposed of in the sewer system?  YES  NO
- Will any form of waste water pre-treatment be utilized at this location?  YES  NO
- Energy Code Compliance Approach (Check only one-must attach compliance forms):  
 ASHRAE 90.1;  IECC;  COMcheck w/ASHRAE;  COMcheck;  Other
- Number of stories: \_\_\_\_\_
- Will plan review be performed by a Third Party Organization?  YES  NO
- Will inspections be performed by a Third Party Organization?  YES  NO
- Name of the Third Party Organization (Check only one):  
 Bureau Veritas  Code Solutions  Metro Code Analysis
- Will/does this location have Gas Service? .....  YES  NO

**Main Use** (Must select one use from the list below):

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Amenity Center  | <input type="checkbox"/> Day Surgery                                | <input type="checkbox"/> Packaging                             |
| <input type="checkbox"/> Amusement Park  | <input type="checkbox"/> Department Store                           | <input type="checkbox"/> Park                                  |
| <input type="checkbox"/> Animal Hospital   | <input type="checkbox"/> Dormitory                                  | <input type="checkbox"/> Parking Garage                        |
| <input type="checkbox"/> Apartments (3+ dwelling units)  | <input type="checkbox"/> Fabricating                                | <input type="checkbox"/> Photography Studio                    |
| <input type="checkbox"/> Assembly/Disassembly  | <input type="checkbox"/> Finishing                                  | <input type="checkbox"/> Post Office                           |
| <input type="checkbox"/> Assisted Living Facility  | <input type="checkbox"/> Fire Station                               | <input type="checkbox"/> Professional Services (CPA, Attorney, |
| <input type="checkbox"/> Auto Lube Center  | <input type="checkbox"/> Fitness Center                             | <input type="checkbox"/> Repair/Processing                     |
| <input type="checkbox"/> Automobile Sales  | <input type="checkbox"/> Fraternity/Sorority House                  | <input type="checkbox"/> Restaurant                            |
| <input type="checkbox"/> Automotive Repair Garage  | <input type="checkbox"/> Funeral Home                               | <input type="checkbox"/> Retail/Wholesale Store                |
| <input type="checkbox"/> Bank/Credit Union   | <input type="checkbox"/> Gas Station                                | <input type="checkbox"/> Retaining Wall                        |
| <input type="checkbox"/> Banquet Hall  | <input type="checkbox"/> Golf Course/Tennis Court                   | <input type="checkbox"/> Retirement Community                  |
| <input type="checkbox"/> Barber/Beauty Shop  | <input type="checkbox"/> Hospital                                   | <input type="checkbox"/> School (ISD)                          |
| <input type="checkbox"/> Barn  | <input type="checkbox"/> Hotel/Motel                                | <input type="checkbox"/> School other than (ISD) through the   |
| <input type="checkbox"/> Bldg w/Materials that Constitute a Hlth, Explosion, Fire or Toxic Hlth Hazard | <input type="checkbox"/> Indoor Arcade                              | <input type="checkbox"/> Take Out Food Establishment           |
| <input type="checkbox"/> Business Office   | <input type="checkbox"/> Indoor/Outdoor Sports Complex JR/Community | <input type="checkbox"/> Theater                               |
| <input type="checkbox"/> Car Wash (Auto/Self-service)  | <input type="checkbox"/> Junior/Community                           | <input type="checkbox"/> Tower                                 |
| <input type="checkbox"/> Carports  | <input type="checkbox"/> Library                                    | <input type="checkbox"/> Undetermined Use (Shell Buildings)    |
| <input type="checkbox"/> Child Care for 5+ children over the age of 2.5 yrs                            | <input type="checkbox"/> Manufacturing                              | <input type="checkbox"/> Unmanned Utility/Existing Site        |
| <input type="checkbox"/> Church  | <input type="checkbox"/> Medical Office                             | <input type="checkbox"/> Utility                               |
| <input type="checkbox"/> Convenience Store with Gas Pumps  | <input type="checkbox"/> Mini-Warehouse                             | <input type="checkbox"/> Veterinarian Clinic                   |
| <input type="checkbox"/> Dance Club  | <input type="checkbox"/> Night Club                                 | <input type="checkbox"/> Warehouse Distribution                |
| <input type="checkbox"/> Day Care - Not Educational  | <input type="checkbox"/> Nursing Home                               | <input type="checkbox"/> Warehousing/Storage                   |

5. **MOVE PERMITS**, provide the following information:

- Number of days moved buildings to be on city streets: \_\_\_\_\_ days
- Number of structures to be moved: \_\_\_\_\_
- Area of 1<sup>st</sup> building to be moved: \_\_\_\_\_ square feet
- Area of 2<sup>nd</sup> building to be moved: \_\_\_\_\_ square feet
- Area of 3<sup>rd</sup> building to be moved: \_\_\_\_\_ square feet
- Type of Move (*select only one*):  Into the City  Out of the City  Within the City  Through the City

6. **DEMOLITION PERMITS**, provide the following information:

**\*\*\*\*\*A separate permit is required for each building being demolished:\*\*\*\*\***

Site area in square feet: \_\_\_\_\_

Proof of asbestos survey:  Yes  No

Total building square footage (all floors) \_\_\_\_\_