



**BUILDING/ELECTRICAL  
PERMIT APPLICATION**

(CHECK ONE) RESIDENTIAL \_\_\_ COMMERCIAL \_\_\_ SUBMIT ELECTRONIC TO PERMITS@YSO.COM

PLEASE PRINT	NAME	STREET ADDRESS	CITY, STATE, ZIP	PHONE NUMBER & EMAIL
PROPERTY OWNER				
APPLICANT				
PLANS BY				
CONTRACTOR				

SITE ADDRESS \_\_\_\_\_ Tenant \_\_\_\_\_

PARCEL ID NO. \_\_\_\_\_ CONSTRUCTION AREA SQ. FT. \_\_\_\_\_ PROJECT COST \$ \_\_\_\_\_

PROJECT DESCRIPTION \_\_\_\_\_

--- COMMERCIAL ONLY --- USE GROUP: \_\_\_\_\_ CONSTRUCTION TYPE: \_\_\_\_\_ OCCUPANT LOAD: \_\_\_\_\_

**REVIEW REQUESTED: CHECK ALL THAT APPLY**

- |   |                                     |   |   |
|---|-------------------------------------|---|---|
| <input type="checkbox"/> New Building       | <input type="checkbox"/> Garage     | <input type="checkbox"/> Fire Alarm         | <input type="checkbox"/> Change of Use    |
| <input type="checkbox"/> Addition           | <input type="checkbox"/> HVAC       | <input type="checkbox"/> Fire Suppression   | <input type="checkbox"/> Signage          |
| <input type="checkbox"/> Alteration         | <input type="checkbox"/> Electrical | <input type="checkbox"/> Hood Suppression   | <input type="checkbox"/> Pool (In Ground) |
| <input type="checkbox"/> Deck _____ Sq. ft. | <input type="checkbox"/> Gas Line   | <input type="checkbox"/> Hood Exhaust       | <input type="checkbox"/> Pool (Above)     |
| <input type="checkbox"/> Shed _____ Sq. ft. | <input type="checkbox"/> Fence      | <input type="checkbox"/> Cert. of Occupancy |   |

Electrical Service Size \_\_\_\_\_ Line Drawing Required over 400 AMP

Other (specify) \_\_\_\_\_

Is the property located in a Floodplain? Yes / No

All information contained in this application is true, accurate, and complete to the best of my knowledge and I do hereby agree to complete the project in compliance with all relevant building codes.

OWNER/OWNER REP. (PLEASE PRINT) \_\_\_\_\_ EMAIL \_\_\_\_\_

OWNER/OWNER REP SIGNATURE \_\_\_\_\_ APPLICATION DATE \_\_\_\_\_

Auditor Information: # of Bedrooms: \_\_\_\_\_ # of Baths: \_\_\_\_\_ # of Stories: \_\_\_\_\_ Livable Sq. Ft.: \_\_\_\_\_ Finished Basement Sq. Ft. \_\_\_\_\_

**OFFICE USE ONLY**

DEPOSIT \$ \_\_\_\_\_ RECEIVED BY \_\_\_\_\_ PAYMENT: CASH CHECK CREDIT RECEIPT# \_\_\_\_\_

ZONING APPROVED \_\_\_\_\_ DATE \_\_\_\_\_

BUILDING APPROVED \_\_\_\_\_ DATE \_\_\_\_\_