

		CITY OF GLENDALE BUILDING PERMIT APPLICATION 5850 West Glendale Ave Glendale, Arizona 85301 (623) 930-2800				DATE STAMP
		Zoning Area	Zip Code	Council Dist	Insp Area	Lot Coverage

** COMPLETELY FILL OUT FORM **

Date/Fecha:	Applicant/Contact Person---Aplicante/Persona de Contacto				Telephone/Telefono:	
Applicant Address/Domicilio:					City, State, Zip Code:	
Project Name/Nombre del Proyecto:						
Project Address/Domicilio del Proyecto:					Zip Code/Codigo:	
Parcel No./No. de Parcela:		Subdivision Name:			Lot #/No. del Lote:	
Description of Work/Tipo de Trabajo:						

Property Owner/Propietario:				Telephone/Telefono:		
Address/Domicilio:				City, State, Zip Code:		

Prime Contractor/Contratista:				Telephone/Telefono:		
Address/Domicilio:			City, State, Zip:		License Classification:	
Contractor AZ ROC License Number:			City of Glendale Sales Tax License Number:			
Special Conditions/Comments:						

Permit Type:	<input type="checkbox"/> Building	<input type="checkbox"/> Mechanical	<input type="checkbox"/> Sign/Banner	<input type="checkbox"/> Backflow
	<input type="checkbox"/> Electrical	<input type="checkbox"/> Fire	<input type="checkbox"/> Pool/Spa	<input type="checkbox"/> Demolition
	<input type="checkbox"/> Plumbing	<input type="checkbox"/> Water Heater		<input type="checkbox"/> Combination
Utilities:	<input type="checkbox"/> APS	<input type="checkbox"/> SRP	<input type="checkbox"/> SW Gas	
Flood Zone: _____ If other than Zone X, plan must be reviewed by Land Development Engineering.				
Square Footage/Pies Cuadrados:			Total Construction Valuation/Valor de Construcción:	
			\$ _____	
Signature/Firme su nombre		Print Name/Imprima su nombre		Date/Fecha: