WATERFRONT *West*

Application For Building Permit

Date:_____   Lot#:_____   Street Address:_____

Owner Information: Name_____

Address_____

_____

Phone_____

Phone (cell)_____

Architect/Designer: Name_____

Address_____

_____

Phone_____

Builder: Name_____

Address_____

_____

Phone_____

Type of Construction:

__ Residence
__ Boathouse/Slip
__ Remodel/Repaid
__ Landscape
__ Deck
__ Other _____

Attachments Include:

__ Site Plan
__ Foundation Plan
__ Floor Plans
__ Elevation Drawings
__ Material Samples
__ Other _____

ARC use only: Date Received _____   Date Reviewed _____

Approved: _____ _____ _____ _____   PERMIT #: _____

Disapproved:_____