



PASADENA BUILDING & SAFETY

APPLICATION FOR BUILDING PERMIT

PLEASE CHECK THE PROPERTY TYPE Single-Family Residence Multi-Family Mixed-Use Non-Residential

PLEASE FILL OUT COMPLETELY IN INK

Job Address _____ Case# _____

Unit/Floor _____ Proposed Use _____

Change of Use: Yes No Square Footage _____ Valuation _____

Contact _____ Phone _____

Address _____

Email _____

Property Owner _____ Phone _____

Address _____

Email _____

Contractor _____ Phone _____

Address _____

Email _____

State License No _____

Architect _____ Phone _____

Address _____

Email _____

State License No _____

Engineer _____ Phone _____

Address _____

Email _____

State License No _____

I certify that I have filled out this application completely and state that the above information is correct.

SIGNATURE OF
APPLICANT OR AGENT _____ **DATE** _____

