

Applicant Name (print)

Title

## PLANNING & COMMUNITY DEVELOPMENT

BUILDING & SAFETY DIVISION

809 Center Street • Room 101 • Santa Cruz, CA 95060 (831)420-5120 \*permits@santacruzca.gov

Permit #:	
APPLICATION DATE:	
PERMIT APPLICATION EXPIRATION DATE:	
TIMATED PLAN CHECK REVIEW DUE DATE:	

BUILDING PERMIT APPLICATION  Estimated Plan Check Review Due Date:									
Project Address:							APN:		
CHOOSE ONE:	O New	O AD	DITION	○ REMO	DEL C	ADDITION & REMO	DEL REPAIR		
RESIDENTIAL/TYPE: O SFD O ADU-DETACHED O ADU-ATTACHED O				CHED O JA	DU 🔘 DUF	PLEX OR2	0	COMMERCIAL	
PROJECT DESCRIPTION:									
Describe size and scope of the work proposed and any special features									
APPLICANT					OWNER				
(CHECK ONE)	PROPERTY OWNER	OWNER'S AGENT	O CONTR	RACTOR (C	HECK ONE)	APPLICANT	Owner	Owner-Builder	
FIRST NAME/MI		LAST NAME		Fi	RST NAME/MI		LAST NAME		
ADDRESS	Ports of	ubmitting the plane	The second second	A	DDRESS		$\sim$	$\sim$	
Party submitting the plans. If Owner's Agent, submit an				C	(ITY Property owner's information required				
PHONE	executed Owner's Agent form				HONE	w	ww		
E-MAIL	-Mail				-MAIL				
	BU	JILDER			PLANS PREPARER				
(CHECK ONE)	CK ONE) ONTRACTOR LIC. TYPE/#: OWNER/BUILDER				HECK ONE)	ARCHITECT/E	NGINEER DESIGNER	OWNER	
FIRST NAME/MI	FIRST NAME/MI LAST NAME				FIRST NAME/MI LAST NAME LIC#:				
COMPANY NAME				C	COMPANY NAME				
ADDRESS				) A	ADDRESS Show information for party primarily				
Owner-Builders to read and submit a completed Owner-Builder package prior				0	responsible for the design of the project.				
PHONE	The manufacture of the same				PHONE				
E-MAIL				Show existing conditioned and					
		PERMIT SCO	PE AREAS	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	unconditioned area of house prior to work proposed				
		OCCUPANCY	CCUPANCY CLASSIFICATION CONST		ON TYPE	w	(E) Building Area (Square	FEET] # OF STORIES:	
PROJECT AREA DESCRIPTION		Group	Subgroup	GROUP	Subgroup	BUILDING AREA (SF)	CONDITIONED:	ATTACHED GARAGE	
	-	34400001	1	300000		<del>- 4</del>			
1						UNCONDITIONED:	BASEMENT		
					K	TOTAL:			
							CURRENTLY SPRINKLERED?	Q YES \Q NO	
							ONIER - SEE HTTPS://VW8.CITYOR	FSANTACRUZ.CON PUBLIC/:	
							WUI ZONE	FINOD ZONE	
Occupancy Type required for Commercial & Multi-Family								T. Con Lone	
					oquired		LIQUEFACTION ZONE		
Commercial & I Housing only		for Com	nmercial & M	lulti-Family	)	OPTIONALLY, CONTRACT/BID A Establish permit valuation i			
Housing only							CONTRACT AMOUNT:	Crieck on	
Total Area:  Show area sq. footage of each type of construction/use proposed  The undersigned attests that, to the best of their knowledge, the above information is true and correct:									
	,	ge/							

Signature

Date