

COUNTY OF GLENN – APPLICATION – DEVELOPMENT/BUILDING PERMIT

MANUFACTURED HOME? YES ___ NO ___

PROPERTY OWNER/APPLICANT INFORMATION

LANDOWNER'S NAME: _____ ASSESSOR'S PARCEL #: _____
LANDOWNER'S MAILING ADDRESS: _____ PHONE #: _____
APPLICANT'S NAME: _____ PHONE #: _____
APPLICANT'S MAILING ADDRESS: _____
PROJECT ADDRESS: _____ # OF EXISTING DWELLINGS: _____
DETAILED PROJECT DESCRIPTION: _____
ELECTRICAL: _____ PLUMBING: _____ MECHANICAL: _____ BUILDING USE: _____
I DECLARE THAT UNDER "PENALTY OF PERJURY" THAT THE FOLLOWING INFORMATION IS TRUE AND CORRECT.
SIGNATURE: _____ DATE: _____

CONTRACTOR INFORMATION

CONTRACTOR NAME: _____ PHONE #: _____
CONTRACTOR ADDRESS: _____ LICENSE #: _____ CLASS: _____
CONTRACT PRICE: _____ EMAIL: _____ WORKERS COMP: YES: ___ NO: ___

FOR OFFICE STAFF USE ONLY

PLANNING DIVISION

APPLICATION #: _____ FLOOD ZONE: _____ FLOOD MAP #: _____
ZONING: _____ REQUIRED SETBACKS: FRONT: _____ SIDE: _____ REAR: _____ HEIGHT: _____
PLOT PLAN/ SITE PLAN APPROVAL: YES: _____ NO: _____ COMMENT: _____
AGRICULTURAL STATEMENT: YES: _____ NO: _____ COMMENT: _____
PERMITTED USE IN ZONE: YES: _____ NO: _____ COMMENT: _____
APPROVED FOR ISSUANCE BY: _____ DATE: _____

BUILDING INSPECTION DIVISION

APPLICATION #: _____ PLOT PLAN REQUIRED: YES: _____ NO: _____
OF PLANS TO BE FURNISHED: _____ DESIGN OCC. LOAD: _____ CONST. TYPE: _____ OCCUPANCY: _____
SCHOOL FEES REQUIRED: YES: _____ NO: _____ SCHOOL DISTRICT: _____ AMOUNT: _____
APPROVED FOR ISSUANCE BY: _____ DATE: _____

ENVIRONMENTAL HEALTH DEPARTMENT

PROJECT COMPATIBLE WITH WELL: YES: _____ NO: _____ N.F.A.R.: _____
PROJECT COMPATIBLE WITH SEWAGE DISPOSAL SYSTEM: YES: _____ NO: _____ N.F.A.R.: _____
COMMERCIAL FOOD FACILITY PLANS APPROVED: YES: _____ NO: _____ N.F.A.R.: _____
APPROVED FOR ISSUANCE BY: _____ DATE: _____

PUBLIC WORKS DIVISION

PROJECT HAS BEEN SUBMITTED FOR REVIEW AND APPLICANT HAS APPLIED FOR THE FOLLOWING PERMITS:
APPLICATION #: _____
ENCROACHMENT: _____ IMPROVEMENT PLAN CHECK: _____ IMPROVEMENT INSPECTION: _____ LANDLEVELING: _____
APPROVED FOR ISSUANCE BY: _____ DATE: _____

AIR POLLUTION CONTROL DISTRICT

COMMERCIAL CONSTRUCTION AND ANY WORK WHICH WILL EMIT AIRBORNE PARTICULATES MUST BE CLEARED THROUGH THE DEPARTMENT OF AIR POLLUTION CONTROL IN CONNECTION WITH POLLUTION CONTROL REGULATIONS.
APPROVED FOR ISSUANCE BY: _____ DATE: _____

FIRE AUTHORITY

_____(NAME OF DISTRICT) FIRE DISTRICT HAS REVIEWED AND APPROVED THIS APPLICATION FOR DEVELOPMENT PERMIT
APPROVED FOR ISSUANCE BY: _____ DATE: _____