



CATHEDRAL CITY BUILDING DIVISION
APPLICATION FOR **CONSTRUCTION** PERMIT

FILL OUT COMPLETELY – BLANK SPACES WILL DELAY PLAN CHECK

Date:		Plan Check No.:		Plan Check Deposit: \$	
PROPERTY IDENTIFICATION					
Property Address:					
Lot:		APN:		Tract:	
Lot Size:		Drive Approach Ln. Ft.:		Sidewalk Ln. Ft.:	
PROPERTY OWNER INFORMATION					
Name:				Phone No.: ()	
Address:					
City:			State:	Zip:	
CONTRACTOR INFORMATION					
Name:				Phone No.: ()	
Address:					
City:			State:	Zip:	
Calif. Contractor's License No.:			City Business License No.:		
LENDER INFORMATION					
Name:				Phone No.: ()	
Address:					
City:			State:	Zip:	
No. of Bedrooms:		No. of Bathrooms:	Total S.F. Living Space:	Porch: Patio:	Garage:
Ln. Ft. of Blockwall:			Construction Valuation: \$		
Description of Work:					
<p>* Any excavation requires you to call Dig Alert – toll free <u>1-800-227-2600</u> at least two days before you dig. (<u>Dig Alert</u> services free of charge).</p>					
REQUIRED SET OF PLANS					
<input type="checkbox"/> Plot Plans/ Site:		4 Sets		<input type="checkbox"/> Floor Plan: 3 Sets	
<input type="checkbox"/> Framing Plans:		3 Sets		<input type="checkbox"/> Elevations: 2 Sets	
<input type="checkbox"/> Plumbing/Electrical Mechanical Detail:		2 Sets		<input type="checkbox"/> Structural/Energy & Truss Calcs: 2 Sets	
<input type="checkbox"/> Grading Plans:		3 Sets		<input type="checkbox"/> Landscape Plan: 3 Sets	
WARNING TO OWNER/BUILDERS					
IF YOU USE UNLICENSED CONTRACTORS YOU WILL:					
<ol style="list-style-type: none"> 1. ASSUME all liability for injuries to persons working on the job: 2. HAVE NO RECOURSE through the California Department of Consumer Affairs (State Contractor's License Board). 3. By signing this application you assume full responsibility for all phases of your project and its integrity. 					
Applicant's Signature:				Date:	