

Development Services Department Building & Safety Division 135 N. D Street Perris, CA. 92571 (951) 943-5003 www.cityofperris.org

APPLICATION FOR BUILDING PERMIT

WC. 19				Permit # PMT	
STREET ADDRESS:			Unit #:	APN#:	
DESCRIPTION OF WO	RK:				
SQUARE FEET:		Occu Valuation: _\$ TY		OCCUPANCY TYPE:	
Type of Permit:	☐ Commercial	☐ Industrial	☐ Residential	☐ Multi-Family	☐ Mfg. Home
Number of plans-	ncomplete submitta	als will not be accepted	l:	☐ Fire	☐Mobile Hom
Plans: Ti	tle 24 S	tructural Calcs:	Truss Calcs: _	Other Please	e Specify:
OWNER / TENAN	IT				
Name:				Contact:	
Mailing Address:					
Office #:	Mob	le #:	Email:		
APPLICANT	Sam	e as: □ Owner/Ter	nant * 🗖 Archi	ect * 🗆 Engineer	∗ □ Contracto
Name:				Contact:	
Mailing Address:					
CONTRACTOR	Owne	er-Builder: 🛘 Yes	□ No		
Business Name:				Contact:	
Mailing Address:					
State Contractor's L	icense #:	Class:		City Business License	#:
ARCHITECT					
				Contact:	
Mailing Address:					
		le #:			