

**CITY OF SELAH
PERMIT APPLICATION FORM
698-7365 or 698-7369**

Application to be filled out in full for proper consideration

Job Address: _____ **Parcel No:** _____

Valuation \$ _____

Owner: _____ **Address:** _____

City: _____ **State:** _____ **Zip:** _____ **Phone:** _____

Mailing address: _____ **City** _____ **State** _____ **Zip** _____

Use Zone _____ **Set Backs:** N _____ E _____ S _____ W _____

General Contractor: _____ **Phone No:** _____

St. License No: _____ **Exp Date:** ____/____/____

Address: _____ **City** _____ **State** _____ **Zip** _____

Plumbing Contractor: _____ **Phone No:** _____

Address: _____ **City** _____ **State** _____ **Zip** _____

Mechanical Contractor: _____ **Phone No:** _____

Address: _____ **City** _____ **State** _____ **Zip** _____

Architect: _____ **Phone No:** _____

Address: _____ **City** _____ **State** _____ **Zip** _____

Sign Company: _____ **Phone No:** _____

Address: _____ **City** _____ **State** _____ **Zip** _____

Description of work: _____

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The grant of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Signature of Contractor ____/____/____
Date

Signature of Owner (if builder) ____/____/____
Date

Print Name _____

Application accepted by: _____