



CITY OF GRASS VALLEY

BUILDING PERMIT APPLICATION WITH PLAN-SUBMITTAL

PERMIT # ASSIGNED: _____

PLEASE COMPLETE BOTH SIDES OF THIS APPLICATION IN DETAIL

1. PROJECT LOCATION:

ADDRESS # _____ STREET _____ APT/STE # _____

ASSESSORS PARCEL NUMBER (APN) _____

2. PROPERTY OWNER INFORMATION:

Name _____ Phone # _____

Address _____ City _____ State _____ Zip _____

Email _____

3. LICENSED CONTRACTOR INFORMATION (if applicable):

CSLB # _____

Representative Name _____ Business Name _____

Address _____ City _____ State _____ Zip _____

Phone # _____ Email; _____

Do you have a current City of Grass Valley Business License? YES # _____ / NO (If NO, please select one of the options below)

I will purchase an annual license for \$120 OR I will be charged a \$29 per Permit fee to legally work within the City limits

4. APPLICANT INFORMATION:

Property Owner Contractor

If not owner or contractor, complete the following*:

Name _____ Phone # _____

Mailing Address _____ City _____ State _____ Zip _____

Email _____

** If you are not the Owner of the property or a Licensed Contractor, you must provide written authorization from the owner to be the Agent for this project.*

Application Expiration - I understand this application is valid for 6 months from the date of submittal. If the application expires, the project must be re-submitted and plan review fees will be re-assessed.

Construction Waste Materials - If this project includes a new structure, addition, or demolition, it may be subject to mandatory recycling of construction waste materials. I agree to comply with the required recycling diversion rates based on the type of project. I will complete the Construction Waste Management Worksheet and submit the form prior to issuance of this permit.

Asbestos Notification - If the project involves demolition or renovation, refer to the Demolition Permit Requirements Form: If my project requires me to either notify, or obtain a permit from, the State Air Resources Board, I will comply with this requirement prior to the City issuing this permit.

APPLICANTSIGNATURE: _____ **DATE:** _____

*****PLEASE COMPLETE THE PROJECT INFORMATION ON REVERSE SIDE*****

5. PROJECT NAME: _____

6. ESTIMATED JOB VALUATION: \$ _____ (required for ALL permits)

7. IDENTIFY TYPE OF WORK TO BE COMPLETED (Check all types of work that will be involved in your project):

Building Demolition Electrical Mechanical Plumbing Pool/SPA/Tub Other

8. DETAILED DESCRIPTION OF WORK TO BE COMPLETED (if building exists, please include location of work):

9. RESIDENTIAL PROJECT (Includes all multi-family buildings) Indicate **EXISTING** square footage of residence: _____

A. TOTAL # OF UNITS IN BUILDING: _____

B. SQUARE FOOTAGE: New Residence: _____ Garage/Carport/Shops/Sheds: _____

(Check all that apply) Additions: _____ Remodels/Conversions: _____

Decks: _____ Other (please explain): _____

10. COMMERCIAL PROJECT Indicate **EXISTING** square footage of building: _____

A. TOTAL # OF UNITS IN BUILDING: _____

B. SQUARE FOOTAGE: New: _____ Additions: _____

(Check all that apply) Decks: _____ Other (please explain): _____

Remodel/Conversion/Tenant Improvements: _____

C. IMPERVIOUS AREA IN SQUARE FEET (REQUIRED FOR ALL **NEW** COMMERCIAL CONSTRUCTION): _____

D. CONSTRUCTION TYPE: _____

E. OCCUPANCY TYPE: _____

If existing building, is occupancy changing? Y/N Most Previous Occupancy: _____

F. NAME OF OCCUPYING BUSINESS: _____

11. CHECK BOXES FOR ANY OTHER CITY PERMITS REQUIRED FOR THIS PROJECT - *IT IS YOUR RESPONSIBILITY TO OBTAIN THEM!*

- SEPARATE RETAINING WALL PERMIT (required if you have any retaining walls that are not part of the structure)
- GRADING (required if more than 50 cubic yards of earth or a significant excavation or fill)
- ENCROACHMENT (required if restricting any public right of way)
- TREE REMOVAL (may be required if any tree(s) 10" or more in diameter measured at 54" above ground)
- ENVIRONMENTAL HEALTH APPROVAL (required if hazardous material, food handling or preparation, or prepackaged foods involved)
- FIRE SPRINKLER SYSTEM (Submit Directly to the Grass Valley Fire Department)
- FIRE ALARM SYSTEM (Submit Directly to the Grass Valley Fire Department)
- NONE OF THE ABOVE