



CONSTRUCTION PERMIT

Date Issued _____

Permit # _____

IDENTIFICATION Block _____ Lot _____ Qualification Code _____

Work Site Location _____ Contractor _____

Address _____

Owner in Fee _____

Address _____ Tel. (_____) _____

Lic. No. or Bldrs. Reg. No. _____

Tel. (_____) _____

Is hereby granted permission to perform the following work:

- BUILDING PLUMBING LEAD HAZARD ABATEMENT
- ELECTRICAL FIRE PROTECTION DEMOLITION
- ELEVATOR DEVICES ASBESTOS ABATEMENT OTHER _____
(Subchapter 8 only)

DESCRIPTION OF WORK:

NOTE: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work \$ _____

Construction Official

Date

PAYMENTS (Office Use Only)	
Building	_____
Electrical	_____
Plumbing	_____
Fire Protection	_____
Elevator Devices	_____
Other	_____
DCA State Permit Fee	_____
Cert. of Occupancy	_____
Other	_____
Total	_____
Check No.	_____
Cash	_____
Collected by	_____

(see reverse side)

U.C.C. F170 (rev. 01/04)

1 WHITE-INSPECTOR

2 CANARY-OFFICE

3 PINK-TAX ASSESSOR

4 GOLD-APPLICANT