



Permit Number

# BUILDING PERMIT RESUBMITTAL APPLICATION

Date \_\_\_\_\_

Property Owner Name \_\_\_\_\_

Applicant Name \_\_\_\_\_ Applicant Phone # \_\_\_\_\_

Applicant Email \_\_\_\_\_

Applicant Signature \_\_\_\_\_

Please identify specific changes being made to the project:

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Adding electrical to existing permit: NO \_\_\_\_\_ YES \_\_\_\_\_

Electrical Valuation \$ \_\_\_\_\_

Electrical Contractor: \_\_\_\_\_

Increasing Bedrooms (Y/N) How many? \_\_\_\_\_ Increasing Bathrooms (Y/N) How many? \_\_\_\_\_

Decreasing Bedrooms (Y/N) How many? \_\_\_\_\_ Decreasing Bathrooms (Y/N) How many? \_\_\_\_\_

*(If increasing bedrooms and on a septic system, Health Department approval is required)*

Changes require engineered plans: NO \_\_\_\_\_ YES \_\_\_\_\_

*(If yes, applicant must submit two sets of stamped revised engineered plans)*

Footprint changing? Larger \_\_\_\_\_ Smaller \_\_\_\_\_

*(If yes, applicant must submit a revised plot plan)*

Is the structure increasing in height? NO \_\_\_\_\_ YES \_\_\_\_\_

*(If yes, applicant must submit a revised plot plan)*

Valuation Increase: \$ \_\_\_\_\_ Valuation Decrease: \$ \_\_\_\_\_

## COMMERCIAL PROJECTS:

Increasing the project work area: NO \_\_\_\_\_ YES \_\_\_\_\_

*(If yes, submit two sets of stamped revised engineered plans)*

### **Office Use Only**

Original Plans Pulled \_\_\_\_\_

Taken in by: \_\_\_\_\_

**Fee to be Collected at Issuance**