



Permit Number

BUILDING PERMIT RESUBMITTAL APPLICATION

Date _____

Property Owner Name _____

Property Address _____

Applicant Name _____ Applicant Phone # _____

Applicant Email _____

Applicant Signature _____

Please identify specific changes being made to the project:

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