



# RESIDENTIAL BUILDING PERMIT APPLICATION

Community Development Dept.  
1600 First Street, P.O. Box 660  
Napa, CA 94559-0660  
(707)257-9540

OFFICE USE ONLY	
PERMIT#:	_____
RECEIVED BY:	_____ DATE REC: _____
PARENT PL#:	_____ ENG#: _____

**PROPERTY/WORK DESCRIPTION**

Site Address: \_\_\_\_\_ APN: \_\_\_\_\_

Work Description: \_\_\_\_\_

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<b>NEW SUBMITTAL</b>	<b>DEFERRED SUBMITTAL</b>	<b>REVISE EXISTING (PERMIT #):</b> _____
RESIDENTIAL	ACCESSORY Attached/ Detached	POOL RESIDENTIAL OTHER: _____
NEW	ADDITION	ALTERATION/REPAIR DEMO GRADING cubic yards: _____

**Construction Cost** (\*valuation includes design, material, and labor): \_\_\_\_\_

Existing Sq. Ft. of project: \_\_\_\_\_ Added Sq. Ft. \_\_\_\_\_ Total New Sq. Ft.: \_\_\_\_\_ NO. of Units: \_\_\_\_\_

Is existing equipped with Fire Sprinklers? Y/N \_\_\_\_\_ Occupancy: \_\_\_\_\_ Use: \_\_\_\_\_ Construction Type: \_\_\_\_\_

<b>PROPERTY OWNER</b>	<b>Is the permit being pulled as "owner-builder"?</b>	<b>Yes</b>	<b>No</b>
Owner Name: _____			
Address: _____			
City: _____ State: _____ Zip: _____ Email: _____ Phone #: _____			

**CONTRACTOR, ARCHITECT AND/OR ENGINEER (PLEASE LIST ON SEPARATE PAGE IF NECESSARY)**

Company Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_

License#: \_\_\_\_\_ Class: \_\_\_\_\_ Expires: \_\_\_\_\_

City of Napa Business License #: \_\_\_\_\_ Expires: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone #: \_\_\_\_\_

<b>PRIMARY CONTACT</b>	<b>All communication from our office will be made to this person via email.</b>
Contact Name: _____	Firm Name: _____ License#: _____
Email: _____	Phone #: _____

**SIGNATURE**

I certify that the information on this application is true and correct.

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I represent the:                      Owner                      Contractor                      Authorized Agent (Please provide a signed "Agent Authorization Form" or letter)