



DEPARTMENT OF BUILDING & SAFETY

# PERMIT APPLICATION

333 North Rancho Drive, Las Vegas NV 89106-3703

Phone: (702) 229-6251 Fax: (702) 382-1240

Project #: \_\_\_\_\_ (CLV USE ONLY) Parent (Original) Project #: \_\_\_\_\_  
 FOR:  Commercial & Public Structures  Residential VALUATION: \$ \_\_\_\_\_

**WORK DESCRIPTION:** \_\_\_\_\_ **PROJECT/TENANT NAME:** \_\_\_\_\_

**PROJECT ADDRESS:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

PARCEL NO.: \_\_\_\_\_ LOT/BLOCK: \_\_\_\_\_

ZONE \_\_\_\_\_ LAND USE/ENTITLEMENTS: \_\_\_\_\_

CONTRACTOR INFORMATION	OWNER/BUILDER INFORMATION
Company Name: _____	Owner Name: _____
Company Representative _____	Owner's Representative _____
Phone: _____ Fax: _____	Owner's Phone: _____
E-mail: _____	Owner's Fax: _____
State Contractor License: _____	Owner's E-mail: _____
City of Las Vegas Business License: _____	Additional Contact Phone: _____

REQUIRED FOR SUBMITTAL: (Please note that plan check fees are based on occupancy, use, construction type and square footage)

OCCUPANCY GROUP(S): \_\_\_\_\_ USE: \_\_\_\_\_ CONSTRUCTION TYPE: \_\_\_\_\_

TOTAL SQUARE FOOTAGE: \_\_\_\_\_ AFFECTED SQ' (TI's): \_\_\_\_\_  Is this a High-rise? More than 75'?

**\*\*IF THE BUILDING IS MIXED USE, PROVIDE CODE ANALYSIS PER FLOOR AS A SEPARATE ATTACHMENT\*\***

SQUARE FT OF FLOOR AREAS: 1<sup>st</sup> \_\_\_\_\_ 2<sup>nd</sup> \_\_\_\_\_ 3<sup>rd</sup> \_\_\_\_\_ 4<sup>th</sup> \_\_\_\_\_

Garage \_\_\_\_\_ Patio \_\_\_\_\_ Balcony \_\_\_\_\_ Number of Units \_\_\_\_\_ Number of Stories \_\_\_\_\_

**SPECIAL CONDITIONS:** \_\_\_\_\_

I state that the information I have supplied on this application is true and correct. By signing this application, I agree to comply with all conditions as noted on this permit.

Contractor or Agent / Owner (Print & Sign) \_\_\_\_\_ Date \_\_\_\_\_

Planning Department \_\_\_\_\_ Date \_\_\_\_\_

Land Development/Flood Control Engr. \_\_\_\_\_ Date \_\_\_\_\_

Fire Department \_\_\_\_\_ Date \_\_\_\_\_

Building Department \_\_\_\_\_ Date \_\_\_\_\_

**TOTAL PERMIT FEE:** \$ \_\_\_\_\_

PRE-PAID: Plan Review	\$ _____
PRE-PAID:	\$ _____
<b>TOTAL</b>	<b>\$ _____</b>

**Permit Expires 180 Days After  
Abandonment of Work**  
Permits expire when no inspection has been approved for any 180-day period after the permit has been issued.