



REQUEST FOR PERMIT FEE ESTIMATE

Date of request _____ Applicant _____ Phone # _____

\$114.94 application fee paid Receipt # _____

The estimated fee will be based on the following information. Accuracy is very important.

| | |
|--|--|
| Assessor's Parcel Number: | |
| Address if APN is not available or good description of location: | |
| Type of construction: (commercial only) | |
| Total square footage of building: | |
| Total number of living units: (residential only) | |
| Manufactured Home: | <input type="checkbox"/> Yes <input type="checkbox"/> No Cost of Unit and Foundation (Required) \$ _____ |

Please break down the uses that will occur within the structure:

COMMERCIAL – office, warehouse, industrial plant, etc.

RESIDENTIAL – dwelling (#bed/#bath), garage, shop, decks, etc.

| | | | | |
|-----------------------------|--|--|--|--|
| Uses within building: | | | | |
| Square footage of each use: | | | | |

To Development Services Department:

Please **e-mail** the estimate to: _____ (e-mail address)

Please **fax** the estimate to: Name: _____ Fax: _____

Please **mail** the estimate to: Name: _____

Address: _____

City _____ Zip Code: _____

Date estimate given _____ By _____