



# CONSTRUCTION PERMIT

Date Issued \_\_\_\_\_  
Permit # \_\_\_\_\_

IDENTIFICATION Block \_\_\_\_\_ Lot \_\_\_\_\_ Qualification Code \_\_\_\_\_

Work Site Location \_\_\_\_\_ Contractor \_\_\_\_\_ Address \_\_\_\_\_

Address \_\_\_\_\_

Owner in Fee \_\_\_\_\_ Tel. (\_\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ Lic. No. or Bids. Reg. No. \_\_\_\_\_

Tel. (\_\_\_\_\_) \_\_\_\_\_

Is hereby granted permission to perform the following work:

- BUILDING  PLUMBING  LEAD HAZARD ABATEMENT
- ELECTRICAL  FIRE PROTECTION  DEMOLITION
- ELEVATOR DEVICES  ASBESTOS ABATEMENT  OTHER \_\_\_\_\_  
(Subchapter 8 only)

DESCRIPTION OF WORK:

**NOTE: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.**

Estimated Cost of Work \$ \_\_\_\_\_

Construction Official \_\_\_\_\_

Date \_\_\_\_\_

U.C.C. F170 (rev. 01/04)

1 WHITE-INSPECTOR

2 CANARY-OFFICE

3 PINK-TAX ASSESSOR

4 GOLD-APPLICANT

(see reverse side)

PAYMENTS (Office Use Only)	
Building	_____
Electrical	_____
Plumbing	_____
Fire Protection	_____
Elevator Devices	_____
Other	_____
DCA State Permit Fee	_____
Cert. of Occupancy	_____
Other	_____
Total	_____
Check No.	_____
Cash	_____
Collected by	_____