JENNINGS

CALL FOR INSPECTIONS 337-886-6069

RESIDENTIAL BUILDING PERMIT APPLICATION

Owner:		Permit #	_ Date:
Project Location:		-	
Mailing Address:			
City:	State:	Zip: Phone	#:
Building Permit #	30		
Contractor:		Phone #:_	9 II - 2000-14 (juli 1905 - 1 4
License #:			
based on the Nation	Demolition market value a al Association	as declared by the owne	er or \$82.48 per square foot under roof hern regional average price per square e.
House Moving \$150 Plan Review \$70 GENERAL Out of Town Inspection Re-inspection Extra/Partial Inspection Over time inspection General inspections "No Permit" Fee	\$150.00 F \$50.00 F \$50.00 F \$50.00 P	Paid directly to BCIS	
Total Permit Fee	\$		
Paid by Cash or _	Check	# Visa	Mastercard
Applicant Signature:			Date:
City Official:			Date:

Note Permit will expire 180 days after issue date.