



Industrialized Unit

Location of project \_\_\_\_\_

Owner of property \_\_\_\_\_ Phone \_\_\_\_\_

BBS Approved Manufacturer \_\_\_\_\_ Phone \_\_\_\_\_

Total Square Footage \_\_\_\_\_

Building Use Group(s) Classification Per OBBC (Circle One)

**A1 A2 A3 A4 A5 B E F1 F2 H1 H2 H3 H4 I1 I2 I3 M R1 R2 R3 S1 S2 U**

Construction Type (Circle One) 1A 1B 2A 2B 2C 3A 3B 4 5A 5B

The undersigned is either the property owner or a duly authorized agent of the property owner and do hereby verify the truth and correctness of all facts and information presented with this application and authorize on-site inspections by City Staff.

Owner or Authorized Agent \_\_\_\_\_ Date \_\_\_\_\_

Approved By \_\_\_\_\_ Date \_\_\_\_\_

Planning/Zoning \_\_\_\_\_ Date \_\_\_\_\_

CBO \_\_\_\_\_ Date \_\_\_\_\_

- 1. Structural Permit \$60.00 plus \_\_\_\_\_  
\$.04/sf \_\_\_\_\_
- 2. Electrical Permit \$60.00 plus \_\_\_\_\_  
\$.03/sf \_\_\_\_\_
- 3. Heating/vent/air/HVAC \$60.00 plus \_\_\_\_\_  
\$.02/sf \_\_\_\_\_
- 4. Insulation/Energy Cons per gross sf floor area \$60.00 plus \_\_\_\_\_  
\$.01/sf \_\_\_\_\_
- 5. Total \$ \_\_\_\_\_

INSPECTIONS: For inspector use only:

Electrical	Y/N	Date _____	Inspector _____	Comments _____
Electrical	Y/N	Date _____	Inspector _____	Comments _____
Electrical	Y/N	Date _____	Inspector _____	Comments _____
Rough Plumbing	Y/N	Date _____	Inspector _____	Comments _____
Rough Plumbing	Y/N	Date _____	Inspector _____	Comments _____
Final Plumbing	Y/N	Date _____	Inspector _____	Comments _____
Final Plumbing	Y/N	Date _____	Inspector _____	Comments _____
HVAC	Y/N	Date _____	Inspector _____	Comments _____
HVAC	Y/N	Date _____	Inspector _____	Comments _____
HVAC Final	Y/N	Date _____	Inspector _____	Comments _____
HVAC Final	Y/N	Date _____	Inspector _____	Comments _____
Structural	Y/N	Date _____	Inspector _____	Comments _____
Structural	Y/N	Date _____	Inspector _____	Comments _____
Structural	Y/N	Date _____	Inspector _____	Comments _____
Structural	Y/N	Date _____	Inspector _____	Comments _____
Insulation	Y/N	Date _____	Inspector _____	Comments _____
Insulation	Y/N	Date _____	Inspector _____	Comments _____
Insulation	Y/N	Date _____	Inspector _____	Comments _____
Final Approval	Y/N	Date _____	Inspector _____	Comments _____
Final Approval	Y/N	Date _____	Inspector _____	Comments _____
Final Approval	Y/N	Date _____	Inspector _____	Comments _____