



# City of Colusa Building Permit Application

**For Official Use Only**

Application Fee: \$ \_\_\_\_\_  
Paid: Yes \_\_\_\_\_ No \_\_\_\_\_  
Date: \_\_\_\_\_

Today's Date: \_\_\_\_\_

Job Site Address: \_\_\_\_\_ Parcel Number: \_\_\_\_\_

Applicant/Owner Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

### Detailed Description of Work to be done

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CIRCLE ONE:** Concrete/Block: Yes No    Framing: Yes No    Roofing: Yes No  
Interior Only: Yes No    Electrical: Yes No    Plumbing: Yes No

Total Square Feet of Project Area: \_\_\_\_\_ Valuation of Project: \$ \_\_\_\_\_  
Commercial or Residential: \_\_\_\_\_

### Contractor & Architect Information

Name of Contractor: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

City Business Lic. #/Expiration: \_\_\_\_\_

Contractors Lic. #/Class/Expiration: \_\_\_\_\_

Worker's Comp Carrier: \_\_\_\_\_ Policy #: \_\_\_\_\_ Expiration: \_\_\_\_\_

Name of Architect (if applicable): \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Lic. #/Expiration: \_\_\_\_\_

**Print Name of Applicant**

**Signature of Applicant**

**Date Submitted**

### Planning Department Use Only

Zoning: \_\_\_\_\_

Use Allowed: Yes \_\_\_\_\_ No \_\_\_\_\_

Signature: \_\_\_\_\_  
Bryan Stice / Jenny Keen

Developer Impact Fees Required: Yes \_\_\_\_\_ No \_\_\_\_\_

Date: \_\_\_\_\_

Green Sheet Required: Yes \_\_\_\_\_ No \_\_\_\_\_