



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 or Plumbing: Yes No

Total Square Feet of Project Area: _____ Valuation of Project: \$ _____

Commercial or Residential: _____

Contractor & Architect Information

Name of Contractor: _____

Mailing Address: _____ Phone Number: _____

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: _____

Brian Peterson

Print Name of Applicant

6/27/2016

Signature of Applicant

Date Submitted

Planning Department Use Only

Zoning: _____ Use Allowed: Yes _____ No _____

Signature: _____

Bryan Stice, Senior Planner

Developer Impact Fees Required: Yes _____ No _____

Date: _____

Green Sheet Required: Yes _____ No _____