# Building Permit Application Form

**Permit#:** ______________________  **PA#:** ______________________ (If Applicable)

1. **Project Address:**
   - Unit #: ______________________  - **Floor:** ______________________

2. **Project Description:**
   - **Valuation of Project:** $ ______________________

3. **Type of Project:**
   - **Square Footage:** ______________________
   - **Existing Use:** ______________________
   - **Proposed Use:** ______________________
   - **Electrical**
   - **Mechanical**
   - **Plumbing**
   - **New Structure:** ______________________
   - **Addition:** ______________________
   - **Alteration/Remodel:** ______________________
   - **Garage New:** ______________________
   - **Garage Alter:** ______________________
   - **Other (Misc.):** ______________________
   - **Demolition:** ______________________

4. **Property Owner’s Name:** ______________________  - **Number & Street Name:** ______________________
   - **City & Zip Code:** ______________________  - **Phone Number:** ______________________

5. **Applicant Information:**
   - **Agent for Owner**
   - **Owner**
   - **Owner-Builder**
   - **Agent for Contractor**
   - **Contractor**
   - **Architect**
   - **Engineer**
   - **Developer**
   - **Tenant**
   - **Applicant’s (Contact) Name:** ______________________
   - **Number & Street Name:** ______________________
   - **City & Zip Code:** ______________________  - **Phone Number:** ______________________
   - **Company Name:** ______________________
   - **E-Mail Address:** ______________________
   - **Fax Number:** ______________________

6. **Contractor’s Name:** ______________________  - **Number & Street Name:** ______________________
   - **City & Zip Code:** ______________________  - **Phone Number:** ______________________
   - **Business License #:** ______________________
   - **Contractor’s State License #:** ______________________
   - **License Class:** ______________________
   - **Worker’s Compensation Carrier:** ______________________
   - **Policy #:** ______________________
   - **Expiration Date:** ______________________

7. **Architect’s Name:** ______________________
   - **Number & Street Name:** ______________________
   - **City & Zip Code:** ______________________  - **Phone Number:** ______________________
   - **Company Name:** ______________________
   - **Lic#:** ______________________
   - **Email Address:** ______________________
   - **Fax Number:** ______________________

8. **Tenant’s Name:** ______________________
   - **Number & Street Name:** ______________________
   - **City & Zip Code:** ______________________  - **Phone Number:** ______________________

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9. **Unless a shorter period of time has been established by an official action, plan check approval expires 180 days after the plan check fee has been paid per SMMC 23.06.037 and UAC 304.4. This permit expires 365-days after the permit has been issued and construction has not commenced or if work is suspended or abandoned at any time after the work is commenced for a period of 180 days per Assembly Bill No. 2913.**

   **Signature of Applicant:** ______________________
   - **Print Name:** ______________________
   - **Date:** ______________________
Community Development/Building Division
330 West 20th Avenue • San Mateo, CA 94403
(650) 522-7172 • www.cityofsanmateo.org
-Monday - Friday 8:00 a.m. – 4:30 p.m.
-Closed Thursday 8:00 a.m. – 9:00 a.m.
-Permits can be applied for until 4p.m.
-Code Consultation/Plan Review is from 9:30-11:30a.m. M-F

Additional Information/Notes: