

## City of Lovelock Building and Planning Department

400 14<sup>th</sup> Street P.O. Box 238 Lovelock, NV 89419 Phone: (775) 273-2356 Fax: (775) 273-7979 Email: <u>clerk@cityoflovelock.com</u> Website: <u>www.cityoflovelock.com</u>

## **Building Permit Application**

For Office Use Only Application received by \_

Permit No.

Application must be filled in completely, incomplete applications will not be accepted.

Permits requested:					
conventional construction Type of structure:			mechanical other		
electrical plumbing Application Date				al Cubic Yards: ject Cost:	
Project Location Project Assessor's Parcel No		Locatio	n in County		Address
Applicant Name Mailing Address					Phone No.
City					
Property Owner Name Mailing Address				D	
City				Zip Code	
Project Information Provide a detailed description	of the project				
Type of Structure	Dimensions	Area in Square Feet	Use of st		
Ex. residence, garage, etc.	idence, garage, etc. 20' x 40' 800 sq. ft.		mercial / Industrial		
			Appl	ction will be done by: icant/Property owner tractor es or sq. ft.)	
			Dimensions o	f Lot	
	SEE	REVER	SE SIDE		

List other structures on property					
Distance from site to nearest waterway					
Contractor Information		ł			
Provide information for all contractors involved with the project.	Please attach second sheet	t with any additional contractors.			
Building / General Contractor					
Name	Phone No.				
Mailing Address					
City	State	_ Zip Code			
State License No					
Electrical Contractor					
Name	Phone No.				
Mailing Address					
City		State Zip Code			
State License No.					
Plumbing Contractor		I			
Name	Phone No.				
Mailing Address					
City	State	Zip Code			
State License No.	County License No.				
Mechanical Contractor Name	,				
Mailing_Address	Phone No.				
City					
State License No.	State	Zip Code			
– Septic System C <u>ontractor</u>					
Name					
Mailing_Address	Phone No.				
City					
State License No.	State	Zip Code			
_ Concrete/Mason <u>ry</u>	_ County License No.				
Contractor Name					
Mailing Address	Phone No.				
City					
State License No.	State	Zip Code			
-					
Applicant Signature					
I hereby state that the information provided in this application is correct and true to the best of my knowledge. I agree					
to comply will all applicable state laws and Pershing County ordinances and adopted codes.					
<u>x</u>	Date				
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Three (3) sets of construction plans and one (1) copy of site plan are required to be submitted with each application.