

CITY OF NORTH LAS VEGAS RETAINING WALL / BLOCK APPLICATION FOR PERMIT

Section I

Project Address:	Parcel No.
Lots:	Blocks:
Applicant: Name: _____ Phone# _____ Mailing Address: _____	
Masonry Contractor: Name: _____ Phone # _____ Mailing Address: _____ CNLV Business License Number: _____	
Contact Person: Name: _____ Phone # _____ Mailing Address: _____	
Property Owner: Name: _____ Phone # _____ Mailing Address: _____	
Description of Project: Commercial <input type="checkbox"/> Residential <input checked="" type="checkbox"/> Multi-Family <input type="checkbox"/>	
Retaining Walls <input type="checkbox"/> Block/Screen Walls <input type="checkbox"/>	

Section II

Scope of Work:	<p>Retaining Walls:</p> <p>_____ Linear Ft of 2' High _____ Linear Ft of 5' High</p> <p>_____ Linear Ft of 3' High _____ Linear Ft of 6' High</p> <p>_____ Linear Ft of 4' High</p> <p>Block / Screen Walls:</p> <p>_____ Linear Ft of 6' High</p> <p>_____ Linear Ft of _____ ' High</p>
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Section III (Office Use Only)

Additional Comments or Description:	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
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