



BUILDING PERMIT APPLICATION

Permit Application Center (PAC)

2240 Civic Center Drive

North Las Vegas, NV. 89030 (702) 633-1536

Application # _____

Application Date _____

ASSESSOR PARCEL NUMBER _____

BUILDING ADDRESS

SUBDIVISION _____ UNIT # _____ LOT # _____ BLOCK # _____ MODEL # _____

TENANT NAME _____

PROJECT NAME

OWNER'S NAME _____

OWNER'S MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____ TELEPHONE # _____ FAX # _____

CONTACT PERSON

CONTACT'S MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____ TELEPHONE # _____ FAX# _____

PRINCIPAL DESIGN PROFESSIONAL _____

DESCRIPTION OF WORK (Be Specific):

PROJECT'S TOTAL VALUATION / CONTRACT PRICE:

TYPE OF CONSTRUCTION _____ **OCCUPANCY TYPE** _____ **SPRINKLER SYSTEM?** _____

SQ. FOOTAGE _____ **# UNITS** _____ **# STORIES** _____ **OCCUPANT LOAD** _____ **QAA REQUIRED?** _____

CONTRACTOR'S DECLARATION / INFORMATION

Permit Type

- BUILDING
- FOUNDATION
- NEW
- REPAIR
- ADDITION
- ALTERATION
- DEMOLITION
- REMODEL
- SINGLE FAMILY
- APARTMENTS
- CONDOMINIUMS
- TOWNHOUSES
- COMMERCIAL
- INDUSTRIAL
- MODULAR (SFR)
- MODULAR (COMM)

I hereby certify that I am licensed under the provisions of NRS 624.330.

STATE LIC.# _____ CLASS _____ CNLV BUS LIC. # _____

CONTRACTOR'S NAME _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE # _____ FAX# _____

CONTRACTOR'S SIGNATURE _____

DATE _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and state laws relating to building construction, and hereby authorize representatives of this city to enter upon the above mentioned property for inspection purposes.

Signature of Applicant _____

Date _____

PLAN REVIEW ROUTING SCHEDULE

- Building
- Fire Dept.
- Planning
- Public Works
- Traffic
- Environmental
- Flood Control
- Utilities
- Property Management
- Health Dept.
- Expedite Building Plan Review