

**Midway Fire Prevention Bureau**  
***Application for Commercial Building Permit***

Date \_\_\_\_\_

Permit # \_\_\_\_\_  
Project No. \_\_\_\_\_  
Accepted By \_\_\_\_\_

**(Office Use Only)**

Applicant's Name \_\_\_\_\_

Project Owner's Name: \_\_\_\_\_

Project Name: \_\_\_\_\_

Complete Address of Property: \_\_\_\_\_

Subdivision Name (If Applicable): \_\_\_\_\_

Description of Work to be Done: \_\_\_\_\_

**Occupancy Classification: ( Please specify as referenced in the Life Safety Code )**

\_\_\_\_ Assembly \_\_\_\_ Business \_\_\_\_ Mercantile \_\_\_\_ Storage \_\_\_\_ Other: \_\_\_\_\_

Structure Type: \_\_\_\_\_ Intended Use of Building: \_\_\_\_\_

Length \_\_\_\_\_ Width \_\_\_\_\_ Roof Height \_\_\_\_\_ Number of Stories \_\_\_\_\_

Number of Units \_\_\_\_\_ Sq. Footage per unit \_\_\_\_\_

Total Square Footage \_\_\_\_\_ Cost of Construction \_\_\_\_\_

Impact Fee paid? Yes \_\_\_\_ No \_\_\_\_

Name of Person Applying for Permit: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Contractor State Registration Number: \_\_\_\_\_

If you are a Contractor, provide your Company Name: \_\_\_\_\_