



WASHOE COUNTY

COMMUNITY SERVICES DEPARTMENT

Planning & Building Division

Permit # _____

1001 EAST 9TH STREET
 RENO, NEVADA 89512
 PHONE (775) 328.2020
 FAX (775) 328.6132

Commercial

BUILDING PERMIT APPLICATION

*Email required

Parcel Number: _____ **Address:** _____

Suite: _____

Business/Tenant Information:

Property Owners Name: _____ Phone No.: _____

Mailing Address: _____

Tenant Name: _____ Phone No.: _____

Description of Business _____ Fax No.: _____

Address: _____ *Email: _____

Nevada licensed contractor is required to sign of all commercial permits

Contractor Information:

Contractor: _____ Contact Name: _____

Address: _____

Phone No.: _____ *Email.: _____

Nevada License No.: _____ County Business License No.: _____

License Classification: _____ Dollar Limit: _____

Design Professional Information:

Architect's Name: _____ Phone No.: _____

*E-Mail Address _____ Fax No.: _____

Engineer's Name: _____ Phone No.: _____

*E-Mail Address _____ Fax No.: _____

PERSON TO CONTACT REGARDING THIS PROJECT

Name and Company _____ Phone No.: _____

*E-Mail Address _____ Fax No.: _____



INTEGRITY



EFFECTIVE COMMUNICATION



QUALITY PUBLIC SERVICE



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Planning Information:

Is there a Planning permit associated with this project (ex. special use permit, variance, etc)?

Yes *Planning Permit Number _____ No

Project Information:

Contract Price \$ _____

Use and Occupancy Classification: _____ Type of Construction: _____ Sq ft _____

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Fire Sprinkler System Yes No

Fire Alarm Yes No

Septic System Yes No

Grease or Sand/Oil Interceptor Existing New Not Applicable

Description of Work:

Applicant (print) _____ Date: _____

Signature _____

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