

CITY of CLOVIS

BUILDING DIVISION

1033 Fifth Street Clovis, California 93612 (559) 324-2390

E-mail building@cityofclovis.com

 $\textbf{Apply Online:} \ \underline{\text{https://css.cityofclovis.com/EnerGov_Prod/SelfService\#/home}}$

Permit # SPN:	SPNPVT:
RESIDENTIAL B	BUILDING PERMIT APPLICATION
JOB SITE ADDRESS:	f
Track Number: Lot Number:	
Company / Contractor:	Phone:
E-Mail:	
Contractor's License:	
Applicant:	Phone:
	Fax:
	Phone:
E-mail:	
TYPE OF WORK:	
Check all that apply:	
Grading – Cut:Fill:Total:	□ Demolition □ Sign □ WELC
☐ Re-Roof – Number of Roof Squares:	
DETAILED DESCRIPTION OF WORK TO BE D	
Self-Haul or Will Serve L	etter: Please indicate which method will be used.
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☐ Self-Haul	Will Serve Letter
PROPOSED/ADDED SQUARE FOOTAGE	VALUATION: \$
☐ Building SQ FT: ☐ Pati	o / Porch SQ FT: ☐ Garage / Misc. SQ FT:
Signature:	Date: