

BUILDING PERMIT APPLICATION FORM		CITY OF HANFORD, CALIFORNIA	
DATE: _____		PERMIT NO.: _____	
317 N Douty Street, Hanford, CA 93230		Phone: (559) 585-2581	
		(To be assigned by Building Division) www.ci.hanford.ca.us	
PROJECT INFORMATION			NOTE: A Plan Check Deposit will be required at the time this application is submitted. The deposit will be credited to the actual permit fee.
SITE ADDRESS :			
TYPE OF PROJECT :			
ASSESSORS PARCEL NO.:		VALUATION : \$	
BLDG AREA : (SF)	OCCUPANCY TYPE :	UNDERGR. FIRE LINE : (LF)	
GARAGE AREA: (SF)	CONSTRUCTION TYPE :		
APPLICANT INFORMATION			
NAME			PHONE
ADDRESS			CELL PH.
CITY	STATE	ZIP	FAX
CONTACT			E-MAIL
***APPLICANT SIGNATURE			
PROPERTY OWNER INFORMATION			
NAME			PHONE
ADDRESS			CELL PH.
CITY	STATE	ZIP	FAX
CONTACT			E-MAIL
CONTRACTOR INFORMATION			
NAME			PHONE
ADDRESS			CELL PH.
CITY	STATE	ZIP	FAX
CONTACT			E-MAIL
CONTRACTOR LICENSE NO.		CLASS	EXPIRE
CITY BUSINESS LICENSE NO.		EXPIRE	
ARCHITECT OR DESIGNER INFORMATION			
NAME			PHONE
ADDRESS			CELL PH.
CITY	STATE	ZIP	FAX
CONTACT			E-MAIL
ENGINEER INFORMATION			
NAME			PHONE
ADDRESS			CELL PH.
CITY	STATE	ZIP	FAX
CONTACT			E-MAIL