



CITY OF CHOWCHILLA - BUILDING DIVISION

130 South Second St., Chowchilla, CA 93610

Telephone: (559) 665-8615 Fax: (559) 665-7419

Building Permit Application

Application Date: _____

Valuation of Project: \$ _____

Site Address: _____ APN: _____

Applicant/Property Owner: _____

Address: _____

Telephone: _____ Email: _____

Owner/Builder _____

Company/Contractor Name: _____

Address: _____ Telephone: _____

Email: _____ License Number: _____

Architect or Engineer Name: _____

Address: _____ Telephone: _____

Email: _____ License Number: _____

TYPE OF PERMIT

(Check all that apply)

Residential Commercial Industrial

Addition Demolition Electrical HVAC Mechanical Multi-Family Residence

Plumbing PV Solar Remodel Roofing Sign Single Family Residence

Swimming Pool/Spa Tenant Improvements Other _____

Work Description: _____

Building Sq. Ft.: _____ Garage/Carport Sq. Ft.: _____ Patio/Porch Sq. Ft.: _____

Zoning: _____ Tract: _____ Lot: _____ Lot Size: _____

PLEASE NOTE: ALL FEES ARE NON-REFUNDABLE UNLESS OTHERWISE STATED

Email completed application with plans to buildingpermits@cityofchowchilla.org

Name: _____ Signature: _____
(Print)