



Town of Wheatland

Building and Life Safety Division

Application for Building Permit



Applicant Type:	
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Applicant Information:

Name:	First:	Last:	Phone #:	
Address:	Street:	City:	St:	Zip:

Property Owner: (If Different Than Applicant)

Name:	First:	Last:	Phone #:	
Address:	Street:	City:	St:	Zip:

Project Address: (If different than applicant)	
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Primary Contractor Information:

Contractor:	Contractor Type:
Email Address:	Ph #

Additional Contractors:

Contractor:	Contractor Type:
Contractor:	Contractor Type:
Contractor:	Contractor Type:
Contractor:	Contractor Type:

Permit Type:	Construction Type:	Occupancy Class:
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Project Information:

Proposed Building Use:	Garage Attached: <input type="checkbox"/>	Basement Finished: <input type="checkbox"/>
Legal Description:	No. of Baths:	No of Floors:
Property Zoned As:	Lot Size:	Building SQ. FT.:
Project Description:		
Estimated Total Project Cost:		