TOWN OF RICHLAND NEW BUILD PERMIT

oplicant Name:	Phone:		
ailing Address:	City:	State: _	Zip:
Building Location/Address:			
Township:	Building Dimension:		
Total Floor Area:	Estimated Completion Date:		
Proposed Use:	Estimated Cost:		
Number of Rooms: Bedrooms		_	Bath:
Dining Basement	Other		
Type of Structure: Masonry	Nood Frame Log Struc	ctural Steel Re	einforced Concret
Type of Foundation: Crawlspa	ce Basement Concre	te Slab Wood	Other:
Type of Improvements:			
Building Contractor:	Phone:		
Plumbing Contractor:	Phone:		
Electrical Contractor:	Phone:		
Electrical Panel Size:	Type of Heat:		
Water Supply: City or Well	Sewage	Sewage: Septic Tank or Public Sewer	
Additional Information:			
Office Use:			
Permit #	Date Issued	Building Pe	rmit Fee \$
Improvement Location fee \$	Date Paid	Permit Typ	oe
Zoning Classification Permit Includes: NO ELECTRIC	Flood Zone	Hazard Area: Yl	ES NO