



FARMINGTON CITY - 160 S. MAIN STREET - (801) 451-2383

**BUILDING PERMIT APPLICATION - FILL OUT COMPLETELY**

Lot #: \_\_\_\_\_

Subdivision: \_\_\_\_\_

Valuation: \_\_\_\_\_

Property Address: \_\_\_\_\_

Type of Project: \_\_\_\_\_

**CONTACT INFORMATION OF PERSON TO CALL REGARDING PLANS AND PERMIT:**

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Cell #: \_\_\_\_\_

Alternate #: \_\_\_\_\_

**BUILDING/PROPERTY OWNER:**

Name: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

City: \_\_\_\_\_

Email: \_\_\_\_\_

**(1) GENERAL CONTRACTOR:**

Name: \_\_\_\_\_

State  
License #: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Phone: \_\_\_\_\_

Zip Code: \_\_\_\_\_

**(2) ELECTRICAL CONTRACTOR:**

Name: \_\_\_\_\_

State  
License #: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Phone: \_\_\_\_\_

Zip Code: \_\_\_\_\_

**(3) PLUMBING CONTRACTOR:**

Name: \_\_\_\_\_

State  
License #: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Phone: \_\_\_\_\_

Zip Code: \_\_\_\_\_

**(4) MECHANICAL CONTRACTOR:**

Name: \_\_\_\_\_

State  
License #: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Phone: \_\_\_\_\_

Zip Code: \_\_\_\_\_



**DID YOU REMEMBER TO COMPLETE THESE FIELDS?**