

CONTRACTOR INFORMATION

All Contractors must be registered with the City of Saginaw and Validated on Permit Prior to Permit Being Released

GENERAL CONTRACTOR INFORMATION

Company Name:		
Address:		
City:	State:	Zip:
Phone:	Fax:	Cell:

ELECTRICAL CONTRACTOR INFORMATION

Company Name:		
Address:		
City:	State:	Zip:
Phone:	Fax:	Cell:

MECHANICAL CONTRACTOR INFORMATION

Company Name:		
Address:		
City:	State:	Zip:
Phone:	Fax:	Cell:

PLUMBING CONTRACTOR INFORMATION

Company Name:		
Address:		
City:	State:	Zip:
Phone:	Fax:	Cell:

PROPERTY OWNERS STATEMENT

The intention of this statement is to provide the owner who is occupying the home (not a rental property) the option to take responsibility/liability for the project.

I am the owner and occupant of the above listed property. I have the ability to and will perform the work as described. I am responsible for the construction and inspections of the improvements. If such improvements are found to be defective; I alone am responsible for the cost of any repairs or replacements necessary to bring the improvements into code compliance with the City of Saginaw.

Homeowner/Applicant Signature:

Contractor/Applicant Signature:

Printed Name:	Date:
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-----FOR OFFICE USE ONLY-----

Application Accepted By:	Date:
Plans Delivered to Building Department:	Date:

INSPECTOR PLAN REVIEW

Information for iWorQ		Building Fees		
Zoning:		CODE	DESCRIPTION	FEE AMOUNT
Square Footage:		PERBL	PERMIT FEE	
Construction Value:		PERBL	PLAN REVIEW FEE	
Site Plan Submitted:	YES <input type="checkbox"/> NO <input type="checkbox"/>	SUBTOTAL:		

Inspector Approval:	Date:
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