CITY OF GLENDALE
PERMIT APPLICATION

5850 West Glendale Ave
Glendale, Arizona 85301
(623) 930-2800

Date Stamp

Project Number:	**Permit Number:**

Project Name/Nombre del Proyecto:		
Description or Scope of Work/Tipo de Trabajo:		
Flood Zone: _____ If other than Zone X, plan must be reviewed by Land Development Engineering.		
Project Address/Domicilio del Proyecto:	Zip Code/Codigo:	Parcel No./ No. de Parcela:
Square Footage/Pies Cuadrados:	□ APS □SRP □ SWG	Total Construction Valuation/Valor de Construccion: $_____

Property Owner/Propietario:	Telephone/Telefono:
Address/Domicilio	City, State, Zip Code:

Prime Contractor/Contratista:		Telephone/Telefono:
Address/Domicilio		City, State, Zip Code:
Contractor AZ ROC License Number:	License Classification	City of Glendale Sales Tax License Number:

Contact Person/Applicant---Aplicante/Persona de Contacto	Telephone/Telefono:
Address/Domicilio	City, State, Zip Code:
Email Address:	
Signature/Firme su Nombre:	Date/Fecha:

Completely Fill Out Form Above