



# CITY OF RITZVILLE SIGN PERMIT APPLICATION

Date \_\_\_\_\_

PERMIT NO. \_\_\_\_\_

**Applicant to complete numbered spaces only.**

REC. # \_\_\_\_\_

JOB ADDRESS \_\_\_\_\_

1	LEGAL DESCR	LOT NO.	BLK	TRACT	( <input type="checkbox"/> SEE ATTACHED SHEET)
2	OWNER		MAIL ADDRESS	ZIP	PHONE
3	CONTRACTOR		MAIL ADDRESS	PHONE	LICENSE NO.
4	ARCHITECT OR DESIGNER		MAIL ADDRESS	PHONE	LICENSE NO.
5	ENGINEER		MAIL ADDRESS	PHONE	LICENSE NO.
6	LENDER		MAIL ADDRESS		BRANCH
7	USE OF BUILDING _____				

8 Class of Work:     NEW     ADDITION     ALTERATION     REPAIR     MOVE     REMOVE

9 Describe Work: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

10 Change of Use From \_\_\_\_\_  
 Change of Use To \_\_\_\_\_

11 Valuation of Work: \$ _____	PERMIT FEE
SPECIAL CONDITIONS: _____	STATE FEE
_____	TOTAL
_____	

### NOTICE

**SEPARATE PERMITS ARE REQUIRED FOR ELECTRICAL, PLUMBING, HEATING, VENTILATING OR AIR CONDITIONING.**

THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER WORK IS COMMENCED.

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.

SIGNATURE OF CONTRACTOR OR AUTHORIZED AGENT _____	(DATE)	BUILDING INSPECTOR _____	(DATE)
SIGNATURE OF OWNER (IF OWNER BUILDER) _____	(DATE)	CLERK _____	(DATE)

**WHEN PROPERLY VALIDATED (IN THIS SPACE) THIS IS YOUR PERMIT**

PLAN CHECK VALIDATION	CK.	M.O.	CASH	PERMIT VALIDATION	CK.	M.O.	CASH
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