LIVINGSTON	Livingston Building Department Permit Application			
Residential	Commercial 🗆	Sign□	Well 🗌	Demolition 🗌
PROJECT COST: \$ SITE ADDRESS:				
LEGAL DESCRIPTION:				
PROJECT OR BUSINES	S NAME:			
APPLICANT'S NAME:			PHONE:	
MAILING ADDRESS:				
PROPERTY OWNER:			PHONE:	
MAILING ADDRESS:				
GENERAL CONTRACT	OR:		PHONE:	
ARCHITECT:			PHONE:	
ENGINEER:			PHONE:	
PLUMBER:			PHONE:	
ELECTRICIAN:			PHONE:	
PROJECT DESCRIPTIO	N:			

No building or structure shall be erected, moved, added to or structurally altered without a valid permit. This APPLICATION form is to be completed for all development proposals, which need building permits, pursuant to Chapter 6 of Livingston Municipal Code. This APPLICATION form must be completed by the applicant and approved by the appropriate Departments prior to building permit issuance. Applications will not be accepted without a signature. Incorrect information provided in conjunction with this APPLICATION may result in the delay or revocation of building and/or occupancy permits.

SIGNED:_____

Date received:	

Completion due date: