

WASHOE COUNTY

Permit #

COMMUNITY SERVICES DEPARTMENT

Planning & Building Division

1001 EAST 9TH STREET RENO, NEVADA 89512 PHONE (775) 328.2020 FAX (775) 328.6132

BUILDING PERMIT APPLICATION

Parcel Number:	Address:
Suite:	
Owner Information:	
Property Owners Name:	Phone No.:
Mailing Address:	
Address:	<u>*</u> Email:
	to sign of all commercial permits***
***Nevada licensed contractor is required	
***Nevada licensed contractor is required Contractor: Address:	Contact Name:
Contractor Information: ***Nevada licensed contractor is required Contractor: Address: Phone No.:	Contact Name:
***Nevada licensed contractor is required Contractor: Address: Phone No.: Nevada License No.:	Contact Name:
***Nevada licensed contractor is required Contractor: Address: Phone No.: Nevada License No.:	Contact Name:
***Nevada licensed contractor is required Contractor: Address: Phone No.: Nevada License No.: License Classification:	Contact Name:
***Nevada licensed contractor is required Contractor: Address: Phone No.: Nevada License No.: License Classification: Design Professional Inform	Contact Name:
***Nevada licensed contractor is required Contractor: Address: Phone No.: Nevada License No.: License Classification: Design Professional Inform Architect's Name:	Contact Name:
***Nevada licensed contractor is required Contractor: Address: Phone No.: Nevada License No.: License Classification:	Contact Name:

Person to contact regarding this applic	cation:	
Name and Company *E-Mail Address	Phone No.: Fax No.:	

WWW.WASHOECOUNTY.US





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Project Information:

Project Valuation \$_____ Total Cubic Yards: _____

Special Use Permit Number:_____ (Attach a Copy of Action Order)

Description of Work:

Applicant (print)_____

Date:

QUALITY

PUBLIC SERVICE

Signature_

Nevada licensed contractor is required to sign on all commercial permits



