

**City of Cleveland**  
**Residential Building-M Permit Application**  
*This form must be filled out completely in black or blue ink.*

Date: \_\_\_\_\_

Job Site Address: \_\_\_\_\_

Owner Name: \_\_\_\_\_

Owner Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Owner Phone Number: \_\_\_\_\_

Contractor Name: \_\_\_\_\_

Contractor Address: \_\_\_\_\_  
\_\_\_\_\_

Contractor Phone Number: \_\_\_\_\_ Contractor Fax Number: \_\_\_\_\_

Contractor E-mail: \_\_\_\_\_

Description of Work: \_\_\_\_\_  
\_\_\_\_\_

For Remodels/Additions - Use Total Job Valuation Cost: \_\_\_\_\_

For New Construction - Use Square Footage of Bldg. \_\_\_\_\_

\_\_\_\_\_  
Signature

<b><u>Office Use Only</u></b>	
<b>Permit Number:</b> _____	<b>Pynt. Method:</b> _____
<b>Permit Cost:</b> _____	<b>City Employee:</b> _____