



Building Department
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PROJECT IDENTIFICATION WORKSHEET

TODAY'S DATE: _____ PROJECT ADDRESS _____
 APN _____ PROJECT VALUATION _____

THIS IS NOT A BUILDING PERMIT.

THE INFORMATION PROVIDED IS FOR THE PURPOSE OF COLLECTING DATA FOR THE PROJECT.

RESIDENTIAL COMMERCIAL AGRICULTURE

SECTION 1 APPLICANT INFORMATION		SECTION 2 DESCRIPTION OF WORK
Applicant/Company Name		Briefly describe scope of work: (Attach plans if needed)
Mailing Address, CITY, STATE, ZIP		
Telephone No	Fax No	OTHER MISC. PERMIT TYPES: <input type="checkbox"/> Re-Roof _____ sqft. <input type="checkbox"/> WH Change-out <input type="checkbox"/> Electrical Panel <input type="checkbox"/> Sewer <input type="checkbox"/> Gas Insert <input type="checkbox"/> AC Change-out <input type="checkbox"/> Window Retrofit <input type="checkbox"/> New AC <input type="checkbox"/> Plumbing; No of fixtures _____
Email		
SECTION 3 OWNER INFORMATION (Complete if different from SECTION 1)		
Name		
Mailing Address		City/Zip
Telephone		Email
ARCHITECT INFORMATION		
Company Name		Contact Name
Address		City/Zip
Telephone		Email
CONTRACTOR INFORMATION		
Company Name		Contact Name
Mailing Address		City/Zip
Telephone		Email
State License No	Class	Please provide City of Shafter Business License No

FOR OFFICE USE ONLY			
Received by _____	Date _____	Plans Submitted <input type="checkbox"/> Yes <input type="checkbox"/> No	Qty: _____