

CITY OF SELMA

1710 TUCKER STREET · SELMA, CALIFORNIA 93662

Contractor/Building Permit User

The City of Selma at their March 19, 2007, City Council Meeting and their April 2, 2007, City Council Meeting passed Ordinance No. 2007-3 dealing with modifications to the City's "Garbage Regulations." Section 8-1-15 and 16 of the City Code requires any developer or business owner who need the use of Roll Off Bins for collection of construction debris or other uses and Portable Restrooms within the City of Selma to acquire those items for the City's exclusive Hauler, Waste Management. The new ordinance became effective on April 30, 2007

If you are not currently using Waste Management for these services you may contact the City's contracted waste hauler to arrange for these services to be provided. You may contact **Waste Management at (559) 891-7694.**

If you have any questions please call the City of Selma at (559) 891-2200.

Very truly yours,

Teresa Gallavan
City Manager



Owner's Name/Contractor

Permit Address

Permit #

BUILDING (559) 891 - 2208 / PLANNING (559) 891 - 2209 / FAX # (559) 896-1068

Providing Quality Service With Pride and Commitment

CITY OF SELMA



1710 Tucker Street Selma, CA 93662
Tel. (559) 891-2208 FAX (559) 896-1068

APPLICATION FOR BUILDING/ENGINEERING/FIRE PERMIT

DATE _____

ALL SUB-CONTRACTORS NEED TO HAVE A CITY OF SELMA BUSINESS LICENSE

TYPE OF PERMIT

BUILDING ELECTRICAL MECHANICAL PLUMBING FENCE
 FIRE POOL DEMO ENCROACHMENT GRADING OTHER

SITE ADDRESS _____

PROPERTY OWNER

NAME _____ PHONE #:HOME _____

ADDRESS _____ PHONE #:WORK _____

CITY/STATE/ZIP _____ PHONE #: FAX _____

DETAILED DESCRIPTION OF WORK _____

VALUATION (MATERIALS/LABOR) OF PROPOSED WORK \$ _____

SQ. FOOTAGE: LOT BUILDING/HOUSE GARAGE PATIO/PORCH ADDITION

APPLICANT'S SIGNATURE: _____

PERSON PERFORMING WORK:

OWNER/BUILDER? YES _____ NO _____

CONTRACTOR INFORMATION:

NAME: _____ PHONE : WORK: _____

ADDRESS _____ CITY _____ ZIP _____

E-MAIL ADDRESS _____

CONTRACTOR'S LICENSE # _____ EXP. DATE _____ CLASS _____

ARCH/DESIGNER: _____ PHONE # _____ FAX # _____

E-MAIL ADDRESS _____

SMOKE DETECTORS ARE REQUIRED IN SPECIFIED LOCATIONS OF ALL RESIDENCES IF VALUATION EXCEEDS \$1,000

FOR BUILDING DEPARTMENT USE ONLY

ZONING _____	OCCUPANCY _____	OCC CODE _____	MANUAL VAL <u>Y/N</u>
INVESTIGATION <u>Y/N</u>	UNIT FEES <u>Y/N</u>	PLUMBING _____	SPECIAL FEES
PLAN CHK <u>Y/N</u>	DEVEL. IMP <u>Y/N</u>	ELECTRICAL _____	P/W <u>Y/N</u>
SEWER <u>Y/N</u>	SCHOOL FEES <u>Y/N</u>	MECHANICAL _____	CUP <u>Y/N</u>
			MM <u>Y/N</u>

Job Site Address: _____

Type of Project: ___ Residential ___ New ___ Addition ___ Int. Remodel
 ___ Commercial ___ New ___ Addition ___ Int. Remodel

The following documents will be required for submittal for the above project.

BUILDING DEPARTMENT

	<u>Detail</u>	<u>No. of Copies</u>
Site:	_____	_____
Elevation:	_____	_____
Floor:	_____	_____
Electrical:	_____	_____
Plumbing:	_____	_____
Mechanical:	_____	_____
Title 24:	_____	_____
Truss Cales:	_____	_____

FIRE DEPARTMENT

	<u>Detail</u>	<u>No. of Copies</u>
Site:	_____	_____
Floor:	_____	_____
Elevation:	_____	_____
Fire Suppression:	_____	_____

**SELMA-KINGSBURG-FOWLER
SANITATION DISTRICT**

Site:	_____	_____
Floor:	_____	_____
Plumbing:	_____	_____

PLANNING DEPARTMENT

Site:	_____	_____
Floor:	_____	_____
Landscape & Irrigation:	_____	_____

ENGINEERING DEPARTMENT

Site:	_____	_____
Grading & Drainage:	_____	_____