

City of Beulah
Preliminary Permit Information

Applicant Name: _____
Address: _____
Street Address: _____
Phone #: _____

Owner Name: _____
Address: _____
Street Address: _____
Phone #: _____

Contractor Name: _____
Address: _____
Phone #: _____

Mechanical: _____
Address: _____
Phone #: _____

Electrical: _____
Address: _____
Phone: _____

Project Type: _____
Addition: _____
shed, garage, fence, deck, single family, addition
sidewalk, driveway, remodel, other)

Project Location: _____

Foundation Type: _____

Roof Slope/Covering/Type:
_____ Pitch _____ Covering
_____ Gable/Hip/Shed/Ext

Basement:
___ Wood ___ Concrete _____ Depth _____ Slab on
Grade

Heating:
_____ LP/Propane _____ Dual _____ AC

Plumbing:

Lights:

Rooms:
_____ How many rooms

Construction Type:
_____ Wood Frame _____ Pole _____ Steel

Floor Plans: When required after review

Cost of Project: _____

SITE PLAN