



# PERMIT UPDATE

Date Update Issued \_\_\_\_\_  
Permit # \_\_\_\_\_  
Date Permit Issued \_\_\_\_\_

IDENTIFICATION Block \_\_\_\_\_ Lot \_\_\_\_\_ Qualification Code \_\_\_\_\_  
Work Site Location \_\_\_\_\_ Contractor \_\_\_\_\_  
Address \_\_\_\_\_  
Owner in Fee \_\_\_\_\_  
Address \_\_\_\_\_ Tel. (\_\_\_\_\_) \_\_\_\_\_  
Lic. No. or Bldrs. Reg. No. \_\_\_\_\_  
Tel. (\_\_\_\_\_) \_\_\_\_\_

**Is hereby granted permission to perform the following work:**

- BUILDING                     PLUMBING                     LEAD HAZARD ABATEMENT
- ELECTRICAL                     FIRE PROTECTION                     DEMOLITION
- ELEVATOR DEVICES                     ASBESTOS ABATEMENT                     OTHER \_\_\_\_\_  
(Subchapter 8 only)

DESCRIPTION OF WORK:

Estimated Cost of Work \$ \_\_\_\_\_

**NOTE: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.**

\_\_\_\_\_  
Construction Official

\_\_\_\_\_  
Date

U.C.C. F190 (rev. 1/04)

1 WHITE—INSPECTOR

2 CANARY—OFFICE

3 PINK—OFFICE

4 GOLD—APPLICANT

**PAYMENTS (Office Use Only)**

Building \_\_\_\_\_  
 Electrical \_\_\_\_\_  
 Plumbing \_\_\_\_\_  
 Fire Protection \_\_\_\_\_  
 Elevator Devices \_\_\_\_\_  
 Other \_\_\_\_\_  
 State Permit Surcharge Fee \_\_\_\_\_  
 Cert. of Occupancy \_\_\_\_\_  
 Other \_\_\_\_\_  
 Total \_\_\_\_\_  
 Check No. \_\_\_\_\_  
 Cash \_\_\_\_\_  
 Collected by \_\_\_\_\_