



**FOR OFFICE USE ONLY:**

**BLDG USE:** \_\_\_\_\_

**OCCUPANCY LIMIT:** \_\_\_ **BEDROOM(S).** \_\_\_ **PERSON(S)**

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

Inspection & Permit Fee Paid: \_\_\_\_\_ \$100.00 \_\_\_\_\_

Date Received: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Receipt #: \_\_\_\_\_

Check #: \_\_\_\_\_

**ZONING DISTRICT:** \_\_\_\_\_

[ \*All "R-1" UNITS LIMITED TO  
4 PERSONS AS OF 2005.]

No. of Permit Cards: \_\_\_\_\_

PERMIT #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Date Permit Issued: \_\_\_\_ - \_\_\_\_ - \_\_\_\_