



**CITY OF WILDOMAR  
DEPARTMENT OF BUILDING AND SAFETY**

**APPLICATION TO CONSTRUCT WORKSHEET**

<b>PROJECT INFORMATION</b>							<b>For Office Use Only</b>		
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Job Address						Permit #		
City	State		Zip	Thomas Guide Page #		Grid		
APN #	Property Owner Last Name			First Name		Phone #		

**FOR OFFICE USE ONLY**

Planning Case #		Parcel/Tract Map #		Parcel/Lot #		Sq Ft	
Legal	Lot Size	Depth	Frontage	FSB	Lf SB	Rt SB	R SB

**APPLICANT / AGENT INFORMATION**

*Note: The applicant will receive ALL billings, correspondence and refunds for any and all permits. Any changes in applicant information (i.e. from architect to contractor) must be made in writing by the original applicant to the Regional Office Manager.*

Applicant Firm Name								
Address						City		
						State		Zip
Contact Last Nam			First		Phone #			
Permit Use								

**NOTE: PRIOR TO BUILDING PERMIT ISSUANCE, GRADING CLEARANCE MUST BE OBTAINED FROM THE BUILDING DEPARTMENT.**

**CONTRACTOR INFORMATION**

Contractor License #		Expiration Date		License Type				
Workers Comp Provider			Policy #		Expiration			
Firm Name					Phone #			
Address						City		
						State		Zip

**ARCHITECT OR ENGINEER INFORMATION**

Architect/Engineer License #		Expiration Date		License Type				
Firm Name					Phone #			
Address						City		
						State		Zip