

***DO NOT SCHEDULE ANY WORK UNTIL
YOUR APPLICATION HAS BEEN APPROVED***

**PLEASE PROVIDE A FULL DESCRIPTION OF ALL WORK PLANNED. INCLUDE
PICTURES, SPECIFICATION SHEETS, MANUFACTURE BROCHURES, ETC.**

Start Date: _____

Name of Contractor: _____ LIC#: _____

Contractors Phone number: _____

Full Description of Desired Alteration:

(Please attach additional pages if further explanation necessary.)

This application has been reviewed by the BOARD on _____

APPROVED: YES _____ NO _____

Board Signatures:

1. _____ 2. _____ 3. _____

RETURNED: The following additional information is required. Allow an additional
30 days processing time from the time the BOARD reviews your revised submission.
DO NOT FORGET TO INCLUDE THE APPLICATION.

Resubmitted:

APPROVED: YES _____ NO _____

Board Signatures:

1. _____ 2. _____ 3. _____

6/28/2019