



City Of Calimesa

Building & Safety Department
 908 Park Avenue • Calimesa, California 92320
 Phone (909) 795-9801 x226 • Fax (909) 795-4399
 www.cityofcalimesa.net

Permit Application

Project Address:	Date:
Assessor's Parcel Number(s):	
Description of work:	
Valuation (include ALL labor & materials): \$	

This permit is to be issued in the name of the Licensed Contractor or the Property Owner as the permit holder of record who will be responsible and liable for the construction.

Property Owner:	Telephone: ()
Address:	
City:	State: Zip:

Designer	<input type="checkbox"/> Architect <input type="checkbox"/> Engineer <input type="checkbox"/> Designer
Name of Firm:	License #:
Address:	
City:	State: Zip:
Contact Person:	Telephone #:
Contact E-mail	FAX #:

Contractor	
License #	Expiration Date:
Name of Business:	
Address:	
City:	State: Zip:
Worker's Comp Insurance:	Exp Date:
Policy #:	
Contact Person:	Telephone #:
Contact E-mail	

Applicant Printed Name:	
Signature:	
Contact E-mail	Telephone: ()