

*Forward Township*  
**BUILDING PERMIT APPLICATION**  
*Both sides of application to be completed*

**APPLICANT**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE (    ) \_\_\_\_\_

ALTERNATE PHONE (    ) \_\_\_\_\_ CELL PHONE (    ) \_\_\_\_\_

FAX (    ) \_\_\_\_\_ PAGER (    ) \_\_\_\_\_

**OWNER (IF SAME AS APPLICANT CHECK )**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE (    ) \_\_\_\_\_

ALTERNATE PHONE (    ) \_\_\_\_\_ CELL PHONE (    ) \_\_\_\_\_

FAX (    ) \_\_\_\_\_ PAGER (    ) \_\_\_\_\_

**CONTRACTOR (IF SAME AS APPLICANT CHECK )**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE (    ) \_\_\_\_\_

ALTERNATE PHONE (    ) \_\_\_\_\_ CELL PHONE (    ) \_\_\_\_\_

FAX (    ) \_\_\_\_\_ PAGER (    ) \_\_\_\_\_

**LOCATION**

PROPERTY LOCATED AT \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

BETWEEN \_\_\_\_\_ AND \_\_\_\_\_  
(Cross Street) (Cross Street)

SUBDIVISION \_\_\_\_\_ PARCEL # \_\_\_\_\_ ZONING \_\_\_\_\_

TAX MAP # - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ SIZE OF LOT \_\_\_\_\_

DEED BOOK \_\_\_\_\_ VOLUME \_\_\_\_\_ OWNED SINCE \_\_\_\_\_

<b><u>TYPE OF SEWAGE</u></b>	<b><u>TYPE OF WATER</u></b>
<input type="checkbox"/> ON LOT	<input type="checkbox"/> PRIVATE
<input type="checkbox"/> PUBLIC	<input type="checkbox"/> PUBLIC
<input type="checkbox"/> NOT APPLICABLE	<input type="checkbox"/> NOT APPLICABLE

**SEWAGE VERIFICATION REQUIRED AT TIME OF BUILDING PERMIT ISSUANCE**