

REQUEST FOR PRELIMINARY OR CODE COMPLIANCE/OCCUPANCY INSPECTION OR DAMAGE ASSESSMENT

Date of Request:	Permit #:	
Property Address:		
Type of Inspection Requested: Building Other/Details		
Reason for Inspection: Fire Flood Change of Tenant		
Commercial	Residential	Other
Type of Business (for Commercial Business): _		Size: sq. ft.
Property Owner: Mailing Address: City/State/ZIP: Phone:		
Applicant (if different from owner): Mailing Address: City/State/ZIP: Phone:		
Notice: I hereby certify that I have read and examined this application and the information provided is true and correct. I agree to exonerate, indemnify, and save harmless the city from and against all claims or actions, and all expenses incidental to the defense of any such claims, litigation, and actions, based upon or arising out of damage or injury (including death) to persons or property caused by or sustained in connection with any work performed under the building permit issued as a result of this application. I also agree to allow all inspections and right of entry per Section 120-2 of the UDO by the City.		
Signature of Applicant (if different from owner):		Date:
Signature of Property Owner:		Date: