



Town of Hillsborough BUILDING PERMIT APPLICATION

1600 Floribunda Ave • Hillsborough • CA • 94010
650.375-7411 • [fax] 650.375-7415 • www.Hillsborough.net

Permit No. _____ / _____
Permit No. _____ / _____
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(Please write clearly- shaded areas must be filled in)

Plan Review Contact Person

Job Address: _____
Contact Name: _____
Phone #: _____
Fax #: _____
E-mail: _____
Assessors #: _____

Valuation of Project \$

* _____

(Valuation schedule/per sq ft: \$250 new, \$175 addition/substantial remodel, \$125 garage/utility, \$100/or actual cost for minor upgrades)

Plan Check Fee: _____
Revised Plan Check Fee: _____
Check #: _____
Receipt #: _____

Owner of Property

Name: _____
Address: _____
City/ Zip: _____
Telephone #: _____
E-mail: _____

Contractor/Superintendent

BE ADVISED: This information will be posted and available on our website.

Company Name: _____
*** Site Contact Person:** _____
*** Site Telephone #:** _____ Cell# _____
Address: _____
City/ Zip: _____
Telephone #: _____
Fax #: _____
E-mail: _____
Contr. Lic #: _____ Class _____
Workers Comp #: _____ Carrier _____
Business License #: _____

Architect, Designer or Engineer

Name: _____
Address: _____
City/ Zip: _____
Telephone: _____
Fax # _____
E-mail: _____
Business License #: _____

Signature of Applicant or Agent

X _____ Date ____/____/____

Description of Work :							
E) Bldg Current Sq Ft							
N) SFD/ 2 nd unit Sq Ft							
Additional Sq Ft							
Substantial Rem. Sq Ft							
Minor Upgrades Sq Ft							
Garage/Utility Sq Ft							
Removed Sq Ft							
Total Scope of Work Sq Ft		GRD Permit/Plan Ck	Req. N - Y	>500yds	500to 1500yds	>1500yds	>1Acre

NOTE: SQ FT CALCULATIONS MAY BE ADJUSTED TO REFLECT ACTUAL SCOPE OF WORK

If checked , This property may be subject to the special requirements because it is within the following zone: <input type="checkbox"/> FLOOD ZONE <input type="checkbox"/> Wildland-urban interface zone <input type="checkbox"/> Creek and/or riparian zone		initial
If checked , A Construction Completion Deposit of 2% may be required for this permit. The Construction Project Time Limitation ordinance was explained, and the informational handout was provided explaining the time limitations and penalties that would apply if the specified completion date was not met.		initial
If checked , A Recycling Plan must be APPROVED prior to the issuance of a building permit or demolition permit		initial
If checked , Allow 4 to 5 weeks for initial plan review for major projects and 2 to 3 weeks for minor projects		initial

For Office Use Only below this line

Date Plans Filed _____ Received By _____
Planning Date (s) _____ Engineering Date (s) _____