



Commercial Fence Permit

Owner / Project Information

Project Address: _____
 Project Description: _____
 Owner/Tenant Name: _____ Phone# (____) _____ Email: _____
 Owner/Tenant Address: _____

<input type="checkbox"/> Commercial
<input type="checkbox"/> Industrial
Estimated Cost
\$ _____
<small>Estimated Cost does not include values for Plumbing, Electrical, or HVAC work.</small>

Contractor Information

Business Name: _____ **Work being done by owner**
 Business Address: _____
 Contact Person: _____ Phone# (____) _____ Email: _____

Supervising Professional Information

Name and Firm: _____
 Email: _____ Office# (____) _____ Mobile# (____) _____

Commercial Building – New Structure or Addition	FEE	UNIT (Sq. Ft.)	TOTAL
Multi-family (3+), Motels, CBRF	\$150 Or \$0.30 per sq. ft. if greater		
Mercantile, Restaurants, Taverns, Assembly Halls, Offices	\$150 Or \$0.30 per sq. ft. if greater		
Schools, Institutional, Hospitals	\$200 Or \$0.35 per sq. ft. if greater		
Manufacturing, Industrial (office portion = 2nd item)	\$150 Or \$0.25 per sq. ft. if greater		
Vehicle Repair and Vehicle Storage	\$150 Or \$0.30 per sq. ft. if greater		
Warehouse, Mini-Warehouse, Shells, Multi-Tenant (office portion = 2nd item)	\$150 Or \$0.20 per sq. ft. if greater		
Special Occupancies-outdoor pools, towers, tents	\$150 Or \$0.15 per sq. ft.		
Early Start Permit (footing & foundation only)	\$150		
Plan Review for items above require form SBD-118 submittal. See form SBD-118.			
Commercial Alteration			
Alteration, Renovation, or Repair *Exclude costs for Plumbing, Electrical, or Mechanical in calculations	\$150 Or \$11 per \$1,000 of project cost if greater		
Simple Plan Review (If item above is checked, a simple plan review is needed)	\$100	Include in Plan Review below. Do NOT add 40%	
Commercial Replacement, Repair, & Miscellaneous			
Roofing (New/Replacement/Repair) (Shingle/flat/metal/etc.) *Permit required for >25% of roof area cumulative.	\$100 Or \$0.01 per sq. ft. if greater		
Siding, Soffit, Fascia, etc.	\$100		
Commercial Other or Miscellaneous Repairs	\$100		
Commercial Fence or Dumpster Enclosure - New, Replacement, or Repair	\$100		
Interior Demolition or Razing of Structure	\$100 Plus \$0.10 per sq. ft.		
Filling, Grading, Excavating (plus erosion control permit)	\$100		
Environmental Abatement (Asbestos / Lead / Mold / Soil)	\$100		
Plan Review - Accessory Structures & Appurtenances - excluded from SPS 302.31 Any item above requires this plan review.	\$50	Include in Plan Review below. Do NOT add 40%	
<p>Inspections are required before any work is concealed, when work is complete and PRIOR to ANY Occupancy or Use. Please allow at least 24 hours notice prior to requested inspection time and have permit number and address available when requesting inspections. Permit EXPIRES 18 months from date of issuance or where work has not commenced or has ceased for a period of 90 days. FINAL INSPECTIONS ARE MANDATORY - PENALTIES WILL BE CHARGED FOR FAILURE TO CALL FOR INSPECTIONS. Appointments can be made at (262) 420-4732 or WIinspections@safebuilt.com.</p>	Sub-Total		
	Penalty		
	40% Adm. Fee (ALL PERMITS)		
	Plan Review		
	Total		
Conditions of Approval			
<p>Applicant certifies that all information provided above is accurate. Applicant agrees to comply with all Municipal Ordinances and with the conditions of this Permit and further understands that failure to comply with such Ordinances or conditions of the permit may result in suspension or revocation of permit(s), denial of future permits, and/or other penalties. Neither the issuance of this Permit, nor any inspections performed with respect to this Permit, create any legal liability, express or implied, of the Department, Municipality, Agency, or Inspector. Nothing about the issuance of this Permit, nor the conduct of inspections, shall be construed as a service rendered to or on behalf of the applicant, or the owner or occupant of the premises, and such inspections and the issuance of this Permit are for the sole use and benefit of the City of Glendale. No warranty, of any nature, express or implied, shall be inferred from the issuance of this Permit.</p>			
Signature of Applicant _____		Date _____	
Office Use Only	Amount \$	OVP \$	Receipt#
Date	CA / CC / CK #		Initials