



## RECORDS REQUEST FORM

PROPERTY INFORMATION																
<b>Requested Street Address:</b>	<b>Unit, Floor, etc.</b>															
Corner building? <input type="checkbox"/> Yes <input type="checkbox"/> No Other possible addresses:	<table style="width: 100%; border: none;"> <tr> <td style="width: 15%; text-align: center; vertical-align: middle;"><b>Building Occupancy</b></td> <td style="width: 15%;"><input type="checkbox"/> 1-2 Family</td> <td style="width: 15%;"><input type="checkbox"/> Apartment</td> <td style="width: 15%;"><input type="checkbox"/> Condominium</td> <td style="width: 15%;"><input type="checkbox"/> Mixed Use</td> </tr> <tr> <td></td> <td><input type="checkbox"/> High Rise</td> <td><input type="checkbox"/> Warehouse</td> <td><input type="checkbox"/> Commercial</td> <td></td> </tr> <tr> <td></td> <td><input type="checkbox"/> Bank</td> <td colspan="3"><input type="checkbox"/> Other: Specify _____</td> </tr> </table>	<b>Building Occupancy</b>	<input type="checkbox"/> 1-2 Family	<input type="checkbox"/> Apartment	<input type="checkbox"/> Condominium	<input type="checkbox"/> Mixed Use		<input type="checkbox"/> High Rise	<input type="checkbox"/> Warehouse	<input type="checkbox"/> Commercial			<input type="checkbox"/> Bank	<input type="checkbox"/> Other: Specify _____		
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	<input type="checkbox"/> Bank	<input type="checkbox"/> Other: Specify _____														
Applicant Information																
<b>Name:</b>	<b>Signature:</b>															
<b>Address:</b>	<b>Phone</b> (area code and extension):															
<b>Email</b>																
<b>BUILDING RECORDS – DURING SHELTER IN PLACE, RECORDS ARE NOT AVAILABLE FOR VIEWING BUT WE ARE PROVIDING COPIES REQUESTED THROUGH THIS FORM. COPIES ARE \$0.10 CENTS PER PAGE.</b>																
<input type="checkbox"/> <b>PRINT</b> All jobs <b>\$100.01 - \$199.99</b> require prior authorization to printing. <input type="checkbox"/> <b>OK to process</b> _____ (applicant's initials)																
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> <b>ORIGINAL</b> Building Permit (New Construction) <input type="checkbox"/> Front &amp; Back Only  <input type="checkbox"/> <b>ALL</b> Building Permit Applications <input type="checkbox"/> Front &amp; Back Only  <input type="checkbox"/> <b>ALL</b> Advertisement Sign Permit Applications  <input type="checkbox"/> <b>ALL</b> Building Permit <b>Job Cards</b>  <input type="checkbox"/> <b>ALL</b> Certificate of Final Completion (<b>CFC</b>) <input type="checkbox"/> NC Only <input type="checkbox"/> Latest Only                 </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> <b>ALL</b> Electrical Permits  <input type="checkbox"/> <b>ALL</b> Plumbing Permits / Mechanical Permits  <input type="checkbox"/> <b>ALL</b> Notices of Violation/Complaints <input type="checkbox"/> Active Only                 </td> </tr> </table>		<input type="checkbox"/> <b>ORIGINAL</b> Building Permit (New Construction) <input type="checkbox"/> Front & Back Only <input type="checkbox"/> <b>ALL</b> Building Permit Applications <input type="checkbox"/> Front & Back Only <input type="checkbox"/> <b>ALL</b> Advertisement Sign Permit Applications <input type="checkbox"/> <b>ALL</b> Building Permit <b>Job Cards</b> <input type="checkbox"/> <b>ALL</b> Certificate of Final Completion ( <b>CFC</b> ) <input type="checkbox"/> NC Only <input type="checkbox"/> Latest Only	<input type="checkbox"/> <b>ALL</b> Electrical Permits <input type="checkbox"/> <b>ALL</b> Plumbing Permits / Mechanical Permits <input type="checkbox"/> <b>ALL</b> Notices of Violation/Complaints <input type="checkbox"/> Active Only													
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<input type="checkbox"/> Original Building Plans (New Construction) <span style="float: right;"><input type="checkbox"/> ALL Advertisement Sign Plans</span> <input type="checkbox"/> ALL Building Plans																
<b>OR SPECIFIC DOCUMENTS BY PERMIT APPLICATION</b>																
<input type="checkbox"/> <b>OTHER:</b> Permit Application No. _____ <input type="checkbox"/> Building Permit ( <input type="checkbox"/> Front & Back Only) <input type="checkbox"/> Job Card <input type="checkbox"/> CFC <input type="checkbox"/> Plans <input type="checkbox"/> Electrical Permit <input type="checkbox"/> Plumbing Permit																
<b>OR SPECIFIC DOCUMENTS BY DATE RANGE</b>																
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ADDITIONAL COMMENTS																