



CITY OF ALBUQUERQUE

Building Safety Division

600 Second Street N.W.

Albuquerque, New Mexico 87102

Phone (505) 924-3964

Fax (505) 924-3967

APPLICANT TO PROVIDE ALL INFORMATION BELOW:

Construction Address: _____

TYPE OF APPLICATION:

New Building	Remodel
Shell Only	Repair
Addition	Other

CONSTRUCTION DATA:

NUMBER OF STORIES: _____
 SQUARE FOOTAGE: _____
 VALUATION OF WORK: _____

LEGAL DESCRIPTION

LOT NO. _____ BLOCK NO. _____
 SUBDIVISION _____
 TRACT _____ PARCEL _____ UNIT _____
 UNIFORM PROPERTY CODE _____

NO. OF APT. OR
 MOTEL UNITS _____

NO. OF
 BUILDINGS _____

OWNERSHIP

PRIVATE PUBLIC

OWNER

ADDRESS _____ PHONE _____
 _____ ZIP _____

ARCHITECT, ENGINEER OR DESIGNER

ADDRESS _____ PHONE _____
 _____ ZIP _____

CONTRACTOR

ADDRESS _____ PHONE _____
 _____ ZIP _____

NM STATE LICENSE NO. _____
 LICENSE CLASSIFICATION _____
 NM STATE TAX NO. _____
 ABQ. BUSINESS REG. NO. _____

DESCRIPTION OF WORK:

PUBLIC (BUILT WITH PUBLIC FUNDS)
 COMMERCIAL
 TRIPLEX
 FOURPLEX
 APARTMENT COMPLEX GREATER THAN FOUR UNITS
 FOUNDATION ONLY
 FOUNDATION FOR MODULAR BUILDING
 OTHER (DESCRIBE) _____