



CITY OF ALBUQUERQUE
BUILDING SAFETY DIVISION
 600 2ND STREET N.W.
 ALBUQUERQUE, N.M. 87102
 OFFICE 505-924-3964 FAX 505-924-3967

E-PLAN APPLICATION

PERMIT # _____
 ADDITIONAL PERMIT #S _____

APPLICANT TO PROVIDE ALL INFORMATION BELOW:

REISSUE FROM MASTER PLAN # _____

CITY PROJECT # _____

CONSTRUCTION ADDRESS: _____

LEGAL DESCRIPTION:

WITHIN 1000' OF FORMER LANDFILL YES NO

LOT # _____ BLOCK # _____
 SUBDIVISION _____
 TRACT _____ PARCEL _____ UNIT _____
 UPC # _____
 ZONE _____ ZONE ATLAS PAGE _____

TYPE OF APPLICATION:

COMMERCIAL	RESIDENTIAL	GREEN
NEW BUILDING	TENANT IMPROVEMENT	
SHELL ONLY	SWIMMING POOL	
ADDITION	GARDEN WALL, FENCE, RETAINING WALL	
REMODEL	FOUNDATION FOR MODULAR BUILDING	
REPAIR	FOUNDATION FOR MOVED BUILDING	
FOUNDATION ONLY	OTHER	

OWNER:

NAME _____
 ADDRESS _____
 ZIP _____ PHONE _____

OWNERSHIP: PRIVATE PUBLIC

CONSTRUCTION DATA: (THIS PROJECT ONLY)

OF STORIES _____
 SQUARE FOOTAGE: _____
 HEATED _____
 GARAGE _____
 CARPORT, PORCH _____
 OR PATIO COVER _____
 TOTAL SQ. FT. _____

VALUATION OF WORK \$ _____

OF PHASES _____ (MUST BE APPROVED AT SUBMITTAL)

OCCUPANT LOAD _____ (FOR COMMERCIAL PROJECTS ONLY)

OF APT. OR MOTEL UNITS _____ # OF BUILDINGS _____

DESCRIPTION OF WORK: _____

SINGLE FAMILY RESIDENCE	GARAGE
REISSUE	CARPORT
TOWNHOUSE	PATIO COVER
DUPLEX	PATIO ENCLOSURE

PERSON WHO WILL UPLOAD ELECTRONIC PLANS:

NAME _____
 ADDRESS _____
 ZIP _____ PHONE _____
 EMAIL ADDRESS _____

ARCHITECT / ENGINEER / DESIGNER:

NAME _____
 ADDRESS _____
 ZIP _____ PHONE _____

CONTRACTOR:

NAME _____
 ADDRESS _____
 ZIP _____ PHONE _____
 NM STATE LICENSE # _____
 LICENSE CLASSIFICATION _____
 NM STATE CRS # _____
 ABQ. BUSINESS REG. # FA _____

SIGNATURE _____ DATE _____