



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** _____