



Building & Zoning Department
82 North 100 East Suite 102
Cedar City, UT 84720
435-865-5350 Fax 435-865-5359

BUILDING PERMIT INFO SHEET
Electrical Service Upgrade
New Gas Service

(Please complete form in its entirety - including all signatures, prior to submitting application)

Owner of Property: _____ Assessor Parcel # _____

Mailing Address: _____ City: _____

Building Address: _____ City: _____

Phone Number: _____ Cell Phone: _____

Email Address: _____

Subdivision: _____ Lot _____ Block _____

Legal Description: Section _____ Township _____ South; Range _____ West SLB&M

Proposed Use: _____

Owner Signature _____ Date _____

Electrical Contractor: _____ License # _____

Print Name: _____ Business License Issued by: _____

Signature: _____ Phone # _____

Mechanical or Plumbing Contractor: _____ License # _____

Print Name: _____ Business License Issued by: _____

Signature: _____ Phone # _____

Is this Owner/Builder ? Yes No If **yes** please also fill out Owner/Builder Certification form.

How Many Dwellings on Property NOW ? _____

How Many Structures on Property NOW ? _____