



TOWN OF ELIZABETH

Permit #: _____

Building Permit Application - Simple (to be used only for items that do not require a review)

Project Type (Circle One)

ReRoof A/C Furnace A/C-Furnace Combo
Window Replacement Water Heater Other _____

Project Valuation: _____

Project Address: _____

Description of Work: _____

Property Owner: _____

Mailing Address: _____

Phone Number: _____ Email: _____

Primary Contractor: _____

Contractor Address: _____

Contractor Phone Number: _____

Contractor Email: _____

Applicant Signature: _____

Date: _____ (Application must be filled out completely and signed to be valid)

For Internal Use Only: Application: Approved Denied