RENO

BUILDING PERMIT APPLICATION-**ELECTRONIC**

City of Reno-Building & Safety Division Community Development Department 1 E. 1st Street– P.O. BOX 1900 RENO, NV 89505 (775) 334-2063 Email: eplans@reno.gov

REPEAT- CO	MIMERCIAL/RESIDEN HAL/FIRE
Record No.:	
Received By:	

Date Received:

You must have an active ACA account through <u>www.onenv.us</u> in order to submit plans			
electronically. The project APPLICANT will have rights to upload all required documents.			
PARCEL NUMBER: ADDRESS:	LOT/BLDG:		
□Single Family □ Duplex □Apartments □Fence I	□Fire Sprinkler □Fire Alarm □ Other		
Description of Work:			
MST Number: Subdivision Name:			
Plan Number: Elevation Prop	osed: Total Units:		
RTC Voucher:	☐ North ☐ South VMT Amount:		
□ No			
Applicant Information:			
Business or Organization Name:			
Applicant Name:	Applicant Phone:		
Applicant ACA User Name:	Applicant Email:		
Owner Information:			
Name: Er	mail Address:		
Address: Ci	ty: State: Phone No.:		
General Contractor Information:			
Company Name : C	ontact Name:		
Nevada Contractors License #: C	lassification: City License#:		
Contact Phone: Contact Ema	il:		
Project Information:	Total Project Valuation:		
Building Code Year and Edition: Type	of Construction: Occupancy Type:		
New Living Square Footage: N	ew Garage Square Footage:		
New Covered Patio/Deck/Carport Square Footage:			
This project's Total Square Footage:			
Affordable Housing ☐ YES ☐ NO			
Zoning: Building Height: No. of Stories:			
Applicant Signature: Applicant Name (Printed):			