

City of Clifton Building Permit Application
Telephone 254-675-8337
Fax 254-675-8358

Estimated Cost _____

Property Owner

Name _____

Address _____

City/State/Zip _____

Telephone _____

Resident (if Different) _____

Contractor

Company _____

Name _____

Address _____

City/State/Zip _____

Telephone _____

Fax _____

License # _____

Site Address

Type of Permit: Building _____ Electrical _____
Plumbing _____ Sprinkler system _____
A/C _____ Roof _____ Demolition _____

Type of Construction:
New _____ Addition _____ Repair/Replace _____

Construction Includes:

Property Line Setback

Front _____ ft Back _____ ft Side _____ ft

Construction start date: _____

I certify that the above information is true and correct to the best of my knowledge.

Provide drawing with property lines on the back.

Signature of Applicant **Date**

Reviewed by Code Enforcement Officer: Approved _____ **Denied** _____

Comments:

CEO Signature _____ **Date** _____

