



CITY OF LEWES
BUILDING PERMIT APPLICATION
RENOVATION / ADDITION / DEMOLITION

APPLICANT INFORMATION

NAME _____ PHONE # _____

ADDRESS _____

PROPERTY OWNER(S) INFORMATION

NAME(S) _____

ADDRESS _____

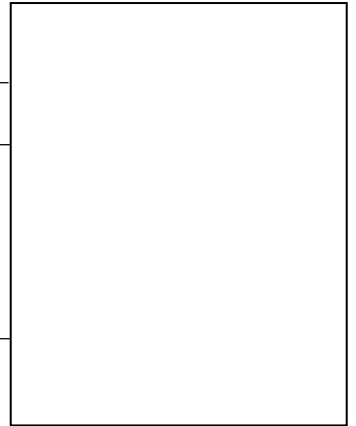
PROPERTY INFORMATION

STREET NAME _____ HOUSE NO. _____ LOT NO. _____

TAX MAP NO. 3.35- _____ PARCEL NO. _____ TRANSFER DATE _____

LEWES BEACH ONLY ~ DNREC APPROVAL: _____ DATE: _____

TYPE OF CONSTRUCTION: (Room, Deck, Shed, Fence, Roof, Street Break, Etc.)



CONTRACTOR INFORMATION

CONTRACTOR(S) NAME _____

(NOTE: ALL SUBCONTRACTORS ARE REQUIRED TO HAVE A VALID CITY OF LEWES BUSINESS LICENSE.)

CITY BUSINESS LICENSE NO. _____ COMPLETION DATE _____

TOTAL CONSTRUCTION/ PROJECT COST \$ _____

APPLICANT SIGNATURE _____ DATE _____

===== [FOR OFFICE USE ONLY] =====

(New construction less \$10,000) _____ (Renovations less \$10,000) _____

Permit Fee:\$ _____ Acct.422 BldgTransferTax (1%):\$ _____ Acct. 403 TransferTax (1/2%):\$ _____ Acct.14404

BLDG. PERMIT # _____ PAYMENT RECEIPT# _____

A SUSSEX COUNTY PERMIT IS ALSO REQUIRED PRIOR TO WORK COMMENCING

**** A COPY OF THE PROPERTY SURVEY MUST ACCOMPANY COMPLETED APPLICATION. ****