

**FOR STAFF USE ONLY**

Application Date: \_\_\_\_\_ Received by: \_\_\_\_\_ Application No. \_\_\_\_\_

DR No. \_\_\_\_\_ Date Approved \_\_\_\_\_ By \_\_\_\_\_ Conditions? \_\_\_\_\_

Fee: \$ \_\_\_\_\_

Plan Check \_\_\_\_\_ Date \_\_\_\_\_ Bldg Official \_\_\_\_\_ Date \_\_\_\_\_

**BUILDING PERMIT CHANGE FORM**  
**CITY OF PIEDMONT, DEPARTMENT OF PUBLIC WORKS**  
120 Vista Avenue, Piedmont, CA 94611  
Tel: 510-420-3050 Fax: 510-658-3167

**SITE ADDRESS:** \_\_\_\_\_

**PARENT PERMIT NO.:** \_\_\_\_\_

**APPLICANT INFORMATION:**

Contact Name(s): \_\_\_\_\_

Company Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ Pager: \_\_\_\_\_

**INCREASE IN VALUE OF JOB:** \$ \_\_\_\_\_

**DESCRIPTION OF CHANGE:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_