

CITY OF SALEM
(540) 375-3036
BUILDING PERMIT APPLICATION FOR
WATERPROOFING AND RELATED WORK

JOB ADDRESS: _____

OWNER: _____

CONTRACTOR: _____

CONTRACTOR ADDRESS: _____

CONTACT: _____ PHONE: _____

STATE LICENSE #: _____ CLASS: _____

PROJECT DESCRIPTION: _____

JOB COST: \$ _____

CONTRACTOR'S SIGNATURE

DATE

PLEASE FAX A COPY OF YOUR CONTRACTOR'S LICENSE ALONG WITH
THIS APPLICATION. ALSO, PLEASE MAIL THE ORIGINAL WITH THE
PERMIT FEE IN THE FORM OF A CHECK TO:

CITY OF SALEM BUILDING INPSECTIONS
ATTN: MARY ELLEN
114 NORTH BROAD ST SALEM VA 24153