



Building Inspection Department
200 E. Broadway, Hobbs, NM 88240
Phone (575) 391-8158

Application # _____

Building Permit Application

Application Received Date _____

Phone _____

Owner _____ Address _____

Circle One: Residential or Commercial Type: New [] Remodel [] Addition [] Other [] please attach required plans

Job Location _____
Address City State Zip

Contractor _____
Name Address City State Zip Phone License #
Email

Architect or Engineer _____
Name Address City State Zip Phone License #

Subdivision _____ Lot _____ Block _____ Lot Size _____

Building is to be _____ ft. wide by _____ ft. long by _____ ft. in height and shall conform in construction.

Area or Volume _____
Cubic/ Square Feet

Type _____ Use Group _____ Basement walls or foundation _____
Type

% of improvements _____ Flood Zone _____ Elevation Certificate Received _____

Subdivision Approved _____ Drainage Plan Approved _____

Job Description: _____

Valuation \$ _____ Permit Fee \$ _____ Plan Review Fee \$ _____ Total \$ _____

I, _____ as the Contractor, hereby agree to comply under this permit with all City, State and Federal codes.

Contractor's Signature _____ Date _____