APN NUMBER: **REMAP #:**
PARCEL ADDRESS:
CITY:
YOUR NAME:
☐ **TELEPHONE NUMBER:**
☐ **EMAIL ADDRESS:**
IF REQUESTING HARD COPIES, PLEASE NOTE THE COPY FEE IS $.50 FOR THE FIRST PAGE AND $.25 FOR EACH REMAINING PAGE, NO CHARGE FOR EMAIL.

Request Date:

REQUEST FOR BUILDING PERMIT RESEARCH

CALL (530)745-3013 FAX (530)745-3101

3091 COUNTY CENTER DRIVE, SUITE 100,
AUBURN, CA 95603
Email: cdrcount@placer.ca.gov

The Building Division retains all completed building permit research forms for a period of 30 days, after which time it is purged. During the retention period, this is considered a public document.

****************BELOW IS FOR OFFICIAL USE ONLY****************

RESEARCH COMPLETED BY: **COMPLETION DATE:**	**CUSTOMER NOTIFIED BY:** ☐**EMAIL** ☐**TELEPHONE**

PERMIT #	YEAR	TYPE YR:
		SQ. FT.
		PO: YR:

☐ **ARCHIVE** ☐**GIS** ☐**MEGA** ☐ **APN LOG** ☐ **PLUS** ☐ **ACCELA** ☐ **SIRE** ☐ **MF**