



CITY OF RICHMOND

DEPARTMENT OF METROPOLITAN DEVELOPMENT
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SALLY L. HUTTON
Mayor

ANTHONY L. FOSTER II
Executive Director

BRUCE L. OESTERLING
Building Commissioner

CHERYL L. SPENCE
Administrative Assistant

Application for Building Permit Authentication Form

CLASS 1 STRUCTURES ONLY

Date _____ **C.D.R. Project #** _____

Applicant _____ **Phone#** _____

Design Professional _____ **Phone#** _____

Owner _____ **Phone#** _____

Address of Project _____

Scope of Work _____

Construction Type _____ **Occupancy Classification** _____

Will This Building Have A Sprinkler System? Yes _____ No _____

Is This An Addition To An Existing Building? Yes _____ No _____

If Yes, What Is The Existing Construction Type? _____

What Is The Existing Occupancy Classification? _____

I do hereby certify that the plans/prints being provided to the Department of Metropolitan Development Permits and Inspection Division are the exact same plans/prints that have been provided to the Department of Homeland Security Plan Review Division.

Applicant's Signature _____

Applicant's Title _____