PERMIT RENEWAL FORM Bern Township

NAME:					
ADDRESS:				3	
:					
· ·					
PHONE:					
Percent of Project Comple	eted:	= 3			
Proposed Completion Dat	e:	<u> </u>			
Are the following items co	ompleted at time of renewal: (Comp	lete if App	licable)	
DRIVEWAY	Yes or No				
SEPTIC SYSTEM	Yes or No				
INSPECTIONS:	FOOTER	Yes	or	No	
	ROUGHIN ELECTRICAL ROUGHIN PLUMBING	Yes Yes	or or	No No	
	FRAMING	Yes	or	No	
	, am requesting a renewal of m				
the construction of	Attached is my \$ ware that upon receipt of this information.				•
enewal permit by mail.	ware that upon receipt of this infor	iliation i w	111 100	sive copies	s or the
	Applicant(s) Sign	ature			
	rippirouni(s) sign	iaiaio			