



DATE \_\_\_\_\_

**CITY OF COMMERCE  
BUILDING DEPARTMENT  
PERMIT FEE ESTIMATE**

APPLICANT'S NAME \_\_\_\_\_

DBA \_\_\_\_\_

JOB ADDRESS \_\_\_\_\_

PHONE # \_\_\_\_\_ FAX # \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

DESCRIPTION OF WORK \_\_\_\_\_

\_\_\_\_\_ SQ FT \_\_\_\_\_

VALUATION SUPPLIED BY APPLICANT \$ \_\_\_\_\_

VALUATION CALCULATED BY COMMERCE  
BUILDING AND SAFETY DEPARTMENT \$ \_\_\_\_\_

PLAN CHECK FEE (SEE NOTE BELOW) \$ \_\_\_\_\_

PERMIT FEE \$ \_\_\_\_\_

PLAN MAINTENANCE FEE \$ \_\_\_\_\_

ISSUANCE FEE \$ \_\_\_\_\_

GREEN FEE \$ \_\_\_\_\_

S.M.I.P FEE \$ \_\_\_\_\_

TOTAL FEE \$ \_\_\_\_\_

NOTE: Plan check fee must be paid at time of plan submittal. Remainder balance must be paid prior to permit issuance. MAKE CHECKS PAYABLE TO : CITY OF COMMERCE