



# Building and Fire Permit Application

Please Print Clearly

Building & Fire Prevention  
17575 Peak Ave  
Morgan Hill, CA 95037-4128  
Phone: (408) 778-6480  
Email: [Permits@morganhill.ca.gov](mailto:Permits@morganhill.ca.gov)

To offset the financial impact of new development or a new business on public infrastructure, new projects may be subject to impact fees. Impact fees are calculated and due at building permit issuance. The [Morgan Hill Business Portal](#) offers a free Development Impact Fee Estimate calculation. Alternatively, the City of Morgan Hill's Engineering Land Development Division can create an estimate for your project for a \$350 fee. Fees are updated twice yearly. Final impact fees may vary from the estimate. For more information, contact Engineering Land Development at 408-778-6480

<b>Building Address</b> _____		Suite # _____
Assessor's Parcel # _____	Tract/PM # _____	Lot # _____
Geologic Hazard Zone: <input type="checkbox"/> Yes <input type="checkbox"/> No	Flood Zone: <input type="checkbox"/> Yes <input type="checkbox"/> No	Year Built _____

<b>Property Owner:</b>		<b>Business Owner / Tenant:</b>	
Name _____	Mailing Address _____	Name _____	Mailing Address _____
City/State/Zip _____	Phone Number _____	City/State/Zip _____	Phone Number _____
Email _____	<input type="checkbox"/> Owner / Builder <input type="checkbox"/> Owner w/ Contractor	Email _____	
<b>Architect / Designer:</b>		<b>Engineer:</b>	
Name _____	Mailing Address _____	Name _____	Mailing Address _____
City/State/Zip _____	Phone Number _____	City/State/Zip _____	Phone Number _____
Email _____	License # _____ Exp. Date: _____	Email _____	License # _____ Exp. Date: _____
<b>Contractor:</b>		<b>Workers' Compensation Information:</b>	
Name _____	Mailing Address _____	Carrier _____	Name of Agent _____
City/State/Zip _____	Phone Number _____	Phone Number _____	Policy # _____ Exp. Date: _____
Email _____	State License # _____ Exp. Date: _____		
MH Bus. License # _____ Exp. Date: _____			

Residential  Commercial / Industrial    Type:  New  Addition  Alteration  Repair  Demolition

**Description of Proposed Work:** \_\_\_\_\_

**Construction Valuation \$** \_\_\_\_\_  
(Labor & Material)

Commercial Floor Area _____ (sq ft)	Number of Units _____	Existing Fire Sprinklers: <input type="checkbox"/> Yes <input type="checkbox"/> No
Residential Floor Area _____ (sq ft)	Number of Stories _____	Grading: Cubic Yards Cut: _____
Garage Floor Area _____ (sq ft)	Number of Bedrooms _____	Cubic Yards Fill: _____
Deck _____ (sq ft)	Number of Bathrooms _____	
Porch _____ (sq ft)	Type of Construction _____	
Patio Cover _____ (sq ft)	Occupancy Group _____	
Accessory Structure _____ (sq ft)	Occupancy Load _____	

Office Use Only

Date Submitted: _____	Permit #: _____	Master Plan #: _____
Plan Check Fee: _____	LRP Fee: _____	Total: _____

**Check Applicable**

Building       Electrical       Mechanical       Plumbing       Grading       Fire

**Electrical Permit**

No. Receptacles/Outlets: \_\_\_\_\_ No. Switches: \_\_\_\_\_ No. Lighting Fixtures: \_\_\_\_\_  Conduit  Conductors  
 Disconnect  EV Charger  Generator  Irrigation Pedestal  Meter Upgrade/Repl.: \_\_\_\_\_ Amps  Motors  
 PV System  PV Battery Backup \_\_\_\_\_ No.  Pool Pump  Sign  Spa  Sub Panel/Load Center: \_\_\_\_\_ No.  
 Temp Power Pole  Temp Service Panel  Temp Power Distribution System  Other \_\_\_\_\_

**Mechanical Permit**

Condensing Unit (A/C) \_\_\_\_\_ No.  Ducts  Evaporator Coil  Fans  Furnace: \_\_\_\_\_ No.  Gas Fireplace  
 Kitchen Hood  Pool Equipment  Other \_\_\_\_\_

**Plumbing Permit** (Note: Additional Commercial Plumbing Maybe Be Subject To Public Works Impact Fees)

Re-pipe Fixtures: No. Sinks \_\_\_\_\_ No. Tubs \_\_\_\_\_ No. Showers \_\_\_\_\_ No. Toilets \_\_\_\_\_ No. Traps \_\_\_\_\_  
 Back Flow  Building Sewer  Gas Test  Gas Line  Gas Meter Upgrade  Thermal Solar  Roof Drain  
 Sewer Drain  Sewer Lateral  Storm Drain  Water Service  Water Heater  Other \_\_\_\_\_

**Fire Permit** (Note: All Fire permits issued separately from Building permits)

Residential Fire Sprinklers  SFD/Townhome  Apartment/Condo: No. of Apt/Condo Units: \_\_\_\_\_  
Commercial Fire Sprinklers  New Construction: \_\_\_\_\_ No. of Heads  Tenant Improvement: \_\_\_\_\_ No. of Heads  
 Fire Alarm: \_\_\_\_\_ No. of Devices  Backflow: \_\_\_\_\_ No.  Medical Gas System  On-Site Hydrant: \_\_\_\_\_ No.  
 Suppression System  Underground Piping  Other \_\_\_\_\_

**Re-roof Permit** (Note: Class 'A' Roof Is Required For Any Home(s) Inside The Fire Hazard Zone)

Removing \_\_\_\_\_ Installing \_\_\_\_\_ No. of Squares \_\_\_\_\_ Pounds of Felt \_\_\_\_\_  
Life Time of Roof:  30yr.  40yr.  50yr. Sheathing Thickness \_\_\_\_\_  New  Existing  N/A

**Plan Check Responses To Be Sent To** (Please check only one)

Owner  Architect / Designer  Engineer  Contractor E-mail Address: \_\_\_\_\_

**Print Name** \_\_\_\_\_ **Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**For Office Use Only**

**Fees:**

Building Permit	_____	Counter Plan Check	_____	Add't Plan Check	_____
Electrical	_____	LRP Fee 15% - PC	_____	Addressing	_____
Mechanical	_____	Microfilm	_____	Bldg Compliance	_____
Plumbing	_____	CBSC	_____	Inspection/RedTag	_____
Fire	_____	Seismic	_____	Photo Copies	_____
LRP Fee - 15%	_____	GIS - Technology	_____	<b>Total Fees:</b>	_____