U.S. DEPARTMENT OF COMMERCE

SURVEY OF RESIDENTIAL  BUILDING OR ZONING PERMIT SYSTEMS  **CENSUS BUREAU***  U.S. CENSUS BUREAU**  BUILDING OR ZONING PERMIT SYSTEMS																				
Person Com This Su		ing																		
Name																				
Title		Ocamania Forma																		
Telephone (Include are																				
Fax (Include area code)					Sample Form															
E-mail address																				
Internet web address	$\dashv$																			
This survey form is used to help us identify permit-issuing jurisdictions in the United States.																				
Mail or Fax to: U.S. Census Burea Manufacturing an Residential Const Washington, DC 2 (Fax) 1–301–763–8	n Div	(Please correct any errors in name, address, and ZIP Code)  We would appreciate your response within 30 days  vision  For further information call 1–800–845–8244																		
Section 1 – Permit System																				
A. If a new residential housing unit were to be constructed, would a building/zoning permit be required?																				
Yes-Go to B below No - Stop! Please return this form now.																				
B. What types of permits are required? (Please exclude: Driveway, Electrical, Inspection, Plumbing and Septic permits)  Ruilding (Include Land Use and Site permits)  7 Oping  Other - Please																				
Building (Include Land Use and Site permits)  Zoning  Other - Please describe:																				
C. What types of permits are required for the following structures and who issues these permits? (Place an "X" in the appropriate boxes.)																				
		Building Permits Commercial							Zoning Permits											
Residentia Number of Ur												Residential Commercial Number of Units Number of Units								3
	1	2	3	4	5+	1	2	3	4	5+	1	2	3	4	5+	1	2	3	4	5+
Municipality (city, borough, town, township, or village)																				
County, Borough, or Parish																				
State																				
Other (i.e.,Third Party Agency, etc.)																				
If "Other" in Section	1, C.	is co	mple	ted,	please	ent	er the	nam	e, add	dress,	and t	telep	hone	num	ber of	the	office	that	issue	es
your permits:																				
Name																				
Address Telephone (Include area code)																				

Section 2 – Geographic Coverage										
A. What is the geographic area covered by your office? (Select only one)										
Entire area of the city, town, village, borough, or township or										
Only a portion of the city, town, village, borough, or township - Describe the area(s) covered below (Additional space in Section 4)										
B. Does your office issue permits for other municipalities?										
Yes - Please list the name(s) of the other municipalities below (Additional space in Section 4)  No										
C. Is a portion of your municipality located in another county?										
Yes - Please list the name(s) of the other county(ies) - (Additional space in Section 4)	No									
Section 3 – Information on Permits Issued										
Last year (January – December), how many building permits were issued for new housing units in your jurisdiction?  (Providing an estimate is acceptable)										
Section 4 – Comments/Additional Information										
Please include any additional information from Sections 1 and 2 that would not fit in the space provided.										
(If more space is needed, please attach a separate sheet.)										