OMB No. 0607-0350: Approval Expires 05/31/2024

U.S. DEPARTMENT OF COMMERCE U.S. CENSUS BUREAU

Census

Bureau

SURVEY OF RESIDENTIAL BUILDING OR ZONING PERMIT SYSTEMS

Title 13, United States Code, Sections 131 and 182, authorizes the Census Bureau to conduct this collection and to request your voluntary assistance. These data are typically provided in public records and are not subject to confidentiality. This collection has been approved by the Office of Management and Budget (OMB). The eight-digit OMB approval number is 0607-0350 and appears at the upper right of this page. Without this approval we could not conduct this survey. We estimate this survey will take an average of 15 minutes to complete. More information about this estimate and an address where you may write with comments is in the letter that accompanies this form.

average of 15 minu	tes to d	complet	e. More	informa	ation ab	out this	estimat	e and a	n addres	ss where	e you m	ay write	with co	mments	is in th	e letter t	hat acc	ompani	es this f	orm.		
Person Completing This Survey																						
Name																						
Title																						
Telephone (Include area code)																						
Fax (Include area code)																						
E-mail address																						
Internet web address																						
This course form is used to help us																						
This survey form is used to help us identify permit-issuing jurisdictions in the United States.						(Please correct any errors in name, address, and ZIP Code)																
Mail or Fax to								(P	iease	correc	il ariy	errors	in nar	ne, ac	laress	, and z	ZIP C	oue)				
U.S. Census Bureau Economic Indicators Division Residential Construction Branch Washington, DC 20233–6900 (Fax) 1–301–763–8587					We would appreciate your response within 30 days For further information call 1–800–845–8244																	
								tion														
A. If a new re	side	ntial	hous	ing u	nit w	ere t	o be	const	ructe	ed, w	ould	a bui	lding/	zonir	ng pe	rmit k	oe re	quire	d?			
Yes – G	io to l	B belo)W										No	– St	op! Pl	ease	retu	rn thi	s for	n no	w.	
B. What types	of p	ermi	its ar	e req	uired	!? (Ple	ase e	xclude	e: Driv	eway,	Elect	rical, I	Inspec	tion, F	Plumbii	ng and	d Sep	tic per	mits)			
Building (Include Land Use and Site					permits) Zoning Other – Please describe:																	
C. What types	of p	ermi	its ar	e req	uired	for t	he fo	llowi	ng st	ructu	ires a	and w	/ho is	sues	thes	e per	mits?	?				
(Flace all	A !!	ı tile	аррі	ориа		ilding		nits							Zo	ning	Perm	its				
Residential Number of Units						Commercial Number of Units						Residential Number of Units						Commercial Number of Units				
		1	2	3	4	5+	1	2	3	4	5+	1	2	3	4	5+	1	2	3	4	5+	
County, Borough or Parish	٦,																					
Other (i.e., Third Party Agency, etc.)																						
If "Other" in S that issues yo				comp	leted	l, plea	ase e	nter	the n	ame,	addr	ess,	and t	eleph	one	numb	er of	the c	office			
Name _																						
Address																						
Telephone	(Incl	ude a	rea c	ode)																		

	Section 2 – Geographic Coverage
A. WI	hat is the geographic area covered by your office? (Select only one)
or	Entire county (includes all of the incorporated and unincorporated places)
or	Entire unincorporated area only
or	Entire unincorporated area and some of the incorporated places – List below (Additional space in Section 4)
or	Part of the unincorporated area only – List below (Additional space in Section 4)
	Part of the unincorporated area and some or all of the incorporated places – List below (Additional space in Section 4)
B. Do	pes your office issue permits for other jurisdictions in another county?
	Yes – Please list the municipality(ies) along with their respective county(ies) (Additional space in Section 4) Municipality(ies) County(ies)
	Section 3 – Information on Permits Issued
C. La	st year (January – December), how many building permits were issued for new housing units in ur jurisdiction? <i>(Providing an estimate is acceptable)</i>
_	
	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.)