



Town of Glen Ridge

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BUILDING PERMIT RENEWAL FORM

ORIGINAL PERMIT NUMBER: _____

DATE OF ORIGINAL PERMIT: _____

RENEWAL APPLICATION DATE: _____

RENEWAL NO.: _____

OWNER: _____

ADDRESS: _____

CONTRACTOR: _____

ADDRESS: _____

PHONE: _____

EMAIL: _____

COMMERCIAL RESIDENTIAL

APPLICANT SIGNATURE: _____

DATE APPROVED: _____

AMOUNT DUE: _____

DATE FEE PAID: _____

CHECK #: _____