



City of Rocklin Building Division

3970 Rocklin Road Rocklin CA 95677 (916) 625-5120 Fax (916)625-5195

PROJECT CONTACT INFORMATION

In order to assure project correspondence is transmitted to the appropriate person, all comments or questions will be forwarded to the contact person designated below. It is important the Building Department be notified if the contact person changes.

Project Name: _____

Project Location/Address: _____

Project Description: _____

Contact Information:

Contact Name: _____

Company Name: _____

Address: _____

City/State/Zip: _____

Phone: _____

Fax # _____ E-mail: _____

Contact's Relationship to Project:

- Applicant
- Contractor
- Engineer/Architect/Designer
- Property Owner
- Other: _____

OFFICE USE ONLY

Building Permit # _____ Application Date: _____

Comments to be:

- Mailed
- Faxed
- E-mailed
- Courtesy phone call when comments are ready

Special Instructions: