



Permit Records Request Form

You can submit this form by fax or e-mail at PSCApplication@glendaleca.gov

Please print or type
Date:
Requestor's Name
Requestor's Address:
E-Mail Address:
Phone Number: ( )

Address(es) Requested (You may request multiple addresses on the same form):
1.
2.
3.
4.
5.
6.
7.
8.
9.
10.

Signature Date
Use a separate sheet if additional addresses are requested.

\* PLEASE ALLOW UP TO 10 DAYS FOR PROCESSING

Sent on: