



**City of Henderson Department
of Building and Fire Safety**

240 S. Water Street, P.O. Box 95050

Henderson, NV 89009-5050

702-267-3600 (Phone)

BFBP-0007

Rev. 11/9/22

OWNER/BUILDER SUB-CONTRACTOR VOUCHER

Site Address: _____

Permit Number: _____

This is to certify that the following company is the Subcontractor and is responsible for work as specified at the above address.

Name of Company: OWNER / BUILDER

Address: Same as above

Telephone #: _____

Qualified Individual: N / A

City of Henderson License Number: N / A

State Contractors License Number: N / A

Check specific discipline of work included in this Subcontractor Voucher

Building

- ☐ Mechanical
☐ Electrical
☐ Plumbing
☐ Temp. Power
☐ Other

Description of Work: _____

Owner of Property: _____

Name of General Contractor: ☐ OWNER / BUILDER

**Department of Building
and Fire Safety
APPROVED FOR CONSTRUCTION**

Subject to field inspection and code
compliance.

By: _____

Date: _____

FOR INSPECTION CALL 702-267-3900

I will request all necessary inspections required by the City of Henderson to assure inspections and compliance with all city regulations for the proposed work. I further realize that this Voucher must be filed with the Department of Building and Fire Safety of the City of Henderson prior to commencing work.

Signed:* _____

Title: ☐ OWNER / BUILDER

Date: _____

* Original signature of Homeowner