

CITY OF _____
BUILDING PERMIT

Permit No. _____

Date _____

CONTRACTOR'S LICENSE NO _____		1. DATE _____	
2. SITE ADDRESS _____		ZIP CODE _____	
3. LEGAL DESCRIPTION PROPERTY I.D. NO. SECTION _____ LOT _____ BLOCK _____ ADDITION _____ PLAT NUMBER _____ PARCEL NUMBER _____			
4. OWNER (Name) _____ (Address) _____ (Tel. No.) _____			
5. ARCHITECT (Name) _____ (Address) _____ (Tel. No.) _____			
6. BUILDER (Name) _____ (Address) _____ (Tel. No.) _____			
7. TYPE OF WORK Fireplace <input type="checkbox"/> Septic <input type="checkbox"/> Heating <input type="checkbox"/> Plumbing <input type="checkbox"/> Reroofing <input type="checkbox"/> New Construction <input type="checkbox"/> Alterations <input type="checkbox"/> Addition <input type="checkbox"/> Finish Basement <input type="checkbox"/> Residing <input type="checkbox"/> Deck <input type="checkbox"/> Porch <input type="checkbox"/> Garage <input type="checkbox"/> Chimney <input type="checkbox"/> Misc. _____			
8. SIZE OF STRUCTURE (Height) _____ (Width) _____ (Depth) _____	9. NO. OF STORIES _____	10. ESTIMATED VALUE _____	
11. COMPLETION DATE _____	12. PROPERTY DIMENSION Width _____ Depth _____	13. NO. OF FAMILIES (if applicable) _____	
14. PROPOSED ELEVATION IN RELATION TO CURB OR WATERWAY. _____ ELEV.	15. PROPERTY AREA OR ACRES Sq. Ft. _____	16. CULVERT SIZE Yes _____ No _____	
17. FRONT YARD set back from road property Ft. _____	18. REAR YARD set back Ft. _____	19. SIDE YARDS set back _____ Right Sd. _____ Left Sd.	
20. MISCELLANEOUS _____ _____ _____ _____ _____ _____ _____ _____			
SPECIAL CONDITIONS It is my responsibility to locate and establish the elevations if needed of all site improvements. Required adjustments at my expense.			

FEES	
PERMIT FEE	_____
PLAN CHECK FEE	_____
INVESTIGATION FEE	_____
ENGINEERING FEE	_____
SITE FEE	_____
DRIVEWAY FEE	_____
CULVERT \$	_____
FIREPLACE	_____/SC
PLUMBING FEE	_____/SC
SEPTIC FEE	_____
MECHANICAL FEE	_____/SC
WATER METER FEE	_____
WATER FEE	_____
SEWER FEE	_____
SURCHARGE FEE	_____
ADMIN. FEE	_____
OTHERS	_____
CONTRACTORS LICENSE	_____
TOTAL FEE	_____

CODE ANALYSIS	
TYPE OF CONST.	_____
USE OF BLDG.	_____
OCCUPANCY GROUP	_____
OCCUPANCY LOAD	_____

ZONING DISTRICT _____

VARIANCE GRANTED, DATE _____

OFF STREET PARKING	
SPACES REQ.	_____
SPACES ON PLAN	_____

MATERIAL FILED W/APPLICATION	
SOILS REPORT	<input type="checkbox"/> Borings
	<input type="checkbox"/> Percolation
	<input type="checkbox"/> Compaction tests
PLANS AND SPECS.	<input type="checkbox"/> Sets _____
SURVEY	<input type="checkbox"/> Copies _____
ENERGY CALCULATIONS	<input type="checkbox"/>
PILING LOGS	<input type="checkbox"/>

FIRE SPRINKLERS REQUIRED	
<input type="checkbox"/> YES	<input type="checkbox"/> NO

SPECIAL APPROVALS	
ZONINGS	_____
FIRE DEPT.	_____
HEALTH DEPT.	_____
PUBLIC WORKS	_____
COUNTY	_____
OTHER	_____

CERTIFICATE OF OCCUPANCY ISSUED	
DATE _____	BY _____

ACKNOWLEDGMENT AND SIGNATURE:

The undersigned hereby agrees that, in case such permit is granted, that all work which shall be done and all materials which shall be used shall comply with the plans and specifications herewith submitted and with all the ordinances of said CITY OF _____ applicable thereto.

SIGNATURE OF APPLICANT _____ APPROVED BY BUILDING INSPECTOR _____

White - City's Copy Yellow - Inspector's Copy Pink - Applicant's Copy Gold - Assessor's Copy