



Building Permit

THIS PERMIT TERMINATES ONE YEAR FROM THE DATE OF THIS APPLICATION.

SECTION A: GENERAL INFORMATION

1. Applicants Name (Last, First, M.I.):		2. Day Phone:	3. Evening Phone:
4. General Contractor:	5. Electrical Contractor:	6. Plumbing Contractor:	
7. Earthwork Contractor:	8. Architect:	9. Other:	

SECTION B: PROJECT INFORMATION

1. Type of Project: <input type="checkbox"/> New Construction <input type="checkbox"/> Addition <input type="checkbox"/> Relocation <input type="checkbox"/> Repair <input type="checkbox"/> Foundation Only <input type="checkbox"/> Roofing <input type="checkbox"/> Other (Specify): _____	3. Lot Dimension Data: (feet) Area in Sq. Feet = _____ Lot Width at Building Baseline = _____ Lot Depth = _____ Road Setback = _____ Side Lot Setback = _____ Minimum access Setback = _____	4. Structure Type: <input type="checkbox"/> Residence <input type="checkbox"/> Garage <input type="checkbox"/> Office <input type="checkbox"/> Warehouse <input type="checkbox"/> Ag. Building <input type="checkbox"/> Storage <input type="checkbox"/> Deck <input type="checkbox"/> Other (Specify): _____	
		5. Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Drainfield <input type="checkbox"/> Holding Tank <input type="checkbox"/> Alt. System	6. Water Supply <input type="checkbox"/> Public <input type="checkbox"/> Private Well
2. Proposed Use: <input type="checkbox"/> Single Family <input type="checkbox"/> Multiple Family <input type="checkbox"/> Agriculture <input type="checkbox"/> Public <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Other (Specify): _____			

SECTION C: STRUCTURAL DATA

1. Structural Dimensions: A. Length (ft): _____ B. Width (ft): _____	3. Heating: <input type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> Electric - Off Peak <input type="checkbox"/> Wood <input type="checkbox"/> Solar <input type="checkbox"/> Other: _____	4. Project Cost Factors: A. Cost of Improvements: \$ _____ B. Estimated Value of Existing Structure: \$ _____ C. Percentage Cost of Improvements: _____ % (A. Divided by B. Times 100%)
2. Type of Construction: <input type="checkbox"/> Wood / Frame <input type="checkbox"/> Masonry <input type="checkbox"/> Metal <input type="checkbox"/> Pole Building <input type="checkbox"/> Prefab	5. Summary of Supporting Documents: <input type="checkbox"/> Sketch Plan <input type="checkbox"/> Lot Survey <input type="checkbox"/> Plan View <input type="checkbox"/> Plumbing Plan <input type="checkbox"/> Lot Plan <input type="checkbox"/> Elevation View <input type="checkbox"/> Lighting Plan <input type="checkbox"/> Other (specify): _____	

SECTION D: AFFIDAVIT & APPROVAL

I hereby certify, with my signature, that all the data listed above and all additional documents are true and correct to the best of my knowledge.

Signature of Applicant

Date

☐ Application is hereby DENIED

☐ Permission is hereby GRANTED. All in accordance with the application, plans, specifications and all other supporting data.

BY ORDER OF:

Signature of Permitting Authority

Title

Date