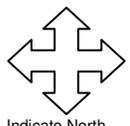


# BUILDING PERMIT APPLICATION

BECOMES PERMIT WHEN SIGNED

Date of Application		Date Work Starts		Receipt No.	Date Issued	Permit Number	
Proposed Use of Structure				<b>BUILDING FEE SCHEDULE</b>			
Bldg. Address				Square Ft. of Building		Valuation	
Address Certificate No.		Assessors Parcel No.		<input type="checkbox"/> Rough Basement <input type="checkbox"/> Finish Basement		Building Fees	
Lot #	Block	Subdivision Name & Number		Carport Sq. Ft.		Plan Check Fees	
Property Location		<input type="checkbox"/> If metes and bounds see instructions		Garage Sq. Ft.		Central Weber Sewer	
Total Property Area- In Acres or Sq. Ft.		Total Bldg. Site Area Used		Type of Bldg.		Storm Drain	
Owner of Property		Phone		Occ. Group		Reinspection Fee	
Mailing Address		City - Zip		No. of Bldgs.		State Fee	
Business Name Address		Business Lic. No.		R. Value		Park Impact Fee	
Architect or Engineer		Phone		No. of Stories		Fire Impact Fee	
General Contractor		Phone		Walls Roof		Transportation Fee	
Business Address - City - Zip		State Lic. No.		City/Co. Lic. No.		Public Safety Fee	
Plumbing Contractor		Phone		No. of Bedrooms		<b>Total</b>	
Business Address - City - Zip		State Lic. No.		City/Co. Lic. No.			
Mechanical Contractor		Phone		No. of Dwellings			
Business Address - City - Zip		State Lic. No.		City/Co. Lic. No.			
Electrical Contractor		Phone		Type of Construction			
Business Address - City - Zip		State Lic. No.		City/Co. Lic. No.			
Previous Usage of Land or Structure		Assessory Bldgs. Now on Lot		<input type="checkbox"/> Frame <input type="checkbox"/> Brick Var. <input type="checkbox"/> Brick <input type="checkbox"/> Block <input type="checkbox"/> Concrete <input type="checkbox"/> Steel			
Dwell Units Now on Lot				Max. Occ. Load			
Type of Improvement/Kind of Construction				Fire Sprinkler			
<input type="checkbox"/> Sign <input type="checkbox"/> Build <input type="checkbox"/> Remodel <input type="checkbox"/> Addition <input type="checkbox"/> Repair <input type="checkbox"/> Move <input type="checkbox"/> Convert Use <input type="checkbox"/> Demolish				<input type="checkbox"/> Yes <input type="checkbox"/> No			
No. of off street parking spaces		Covered Uncovered		Special Approvals		Required	Received
SUB-CHECK		Zone Zone Approved By		Board of Adjustment			Approved
Disapproved		Date		Health Dept.			
Approved		Date		Fire Dept.			
Minimum Setbacks in Feet		Sub-Ck. By Plot Plan		Soil Report			
Front	Side	Side	Rear	Water or Well Permit			
				Traffic Engineer			
Indicate Street If Corner Lot  Indicate North		House or House & Garage If Attached		Flood Control			
				Sewer or Septic Tank			
				City Engineer (off site)			
				Gas			
				Comments:			
				Land Use Cert.			
				Electrical Dept.			
				HiBack C.G. & S.			
				Other			
				Bond Required		<input type="checkbox"/> Yes <input type="checkbox"/> No	Amount
				This application does not become a permit until signed below.			
				Plan Check OK by			
				Signature of Approval			
				Date			

Disapproved \_\_\_\_\_ Date \_\_\_\_\_ Sub-Ck. By \_\_\_\_\_ Plot Plan \_\_\_\_\_

Approved \_\_\_\_\_ Date \_\_\_\_\_

Front	Side	Side	Rear

House or House & Garage If Attached

This permit becomes null and void if work or construction authorized is not commenced within 180 days, or if construction or work is suspended or abandoned for a period of 180 days at any time after work is commenced. I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not the granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction and that I make this statement under penalty of perjury.

Signature of Contractor or Authorized Agent \_\_\_\_\_ Date \_\_\_\_\_

Signature of Owner (if owner) \_\_\_\_\_ Date \_\_\_\_\_

**NOTE: 24 hours notice is required for all inspections.**