

ZONING PERMIT APPLICATION

Applicant Information					
Applicant Name (Indiv., Org. or Entity)		Authorized Representative		Permit #	
Mailing Address		City		State	Postal Code
E-mail Address		Telephone (include area code)		Fax (include area code)	
Landowner Information (if different than Applicant)					
Name (Organization or Entity)		Contact Person		Title	
Mailing Address		City		State	Postal Code
E-mail Address		Telephone (include area code)		Fax (include area code)	
Project or Site Location					
Site Address / Location:		Location ID(s):		Plat / CSM / Lot No.:	
Quarter: <input type="checkbox"/> NW <input type="checkbox"/> NE <input type="checkbox"/> SW <input type="checkbox"/> SE		Section:		Township: N	Range: E
Legal Description:					
Current Zoning:			Current Use:		
Lot Dimensions: Front:		Side:	Rear:	Side:	Lot Area: <input type="checkbox"/> acres or <input type="checkbox"/> square feet
Project Information					
<u>Structure:</u>		<u>Type:</u>		<u>Use:</u>	
<input type="checkbox"/> Principal		<input type="checkbox"/> New		<input type="checkbox"/> Res. <input type="checkbox"/> One-Family	
<input type="checkbox"/> Accessory		<input type="checkbox"/> Addition		<input type="checkbox"/> Two-Family	
<input type="checkbox"/> Other: _____		<input type="checkbox"/> Other: _____		<input type="checkbox"/> Multi-Family	
<u>Project Description:</u>		<input type="checkbox"/> Com./Ind./Civic		<u>Setbacks – Principal Bldg.:</u>	
		<input type="checkbox"/> Agricultural		Front: Side:	
				Rear: Side:	
				<u>Lot Coverage:</u>	
				Existing:	
				Proposed:	
				<u>Impervious Surface:</u>	
				Existing:	
				Proposed:	
Estimated Cost: \$ _____			Height (to peak):		No. Stories:
Project Plans (see next page)					
<input type="checkbox"/> Site Plan		<input type="checkbox"/> Building Plans		<input type="checkbox"/> Grading/Drainage Plan	
Fees					
<input type="checkbox"/> New Home--\$250.00		<input type="checkbox"/> Attached-Unattached Garage- \$ 50.00		<input type="checkbox"/> Deck – Permanent Pool-\$50.00	
<input type="checkbox"/> Addition –House- \$100.00		<input type="checkbox"/> Fence-\$60.00		<input type="checkbox"/> Com.-New- \$250.00 Add- \$150.00	
Certification & Permission					
Certification: I hereby certify that I am the landowner of the property which is the subject of this Application. I certify that the information contained in this form and attachments is true and accurate. I understand that failure to comply with any or all of the provisions of the ordinances and/or permit may result in notices, fines / forfeitures, stop work orders, permit revocation, and cease & desist orders.					
Permission: As landowner of the property, I hereby give the permit authority permission to enter and inspect the property to evaluate this application, to determine compliance with the ordinances, and to perform corrective actions after issuing proper notice to the landowner.					
Applicant Signature				Date Signed	
Landowner Signature (required)				Date Signed	

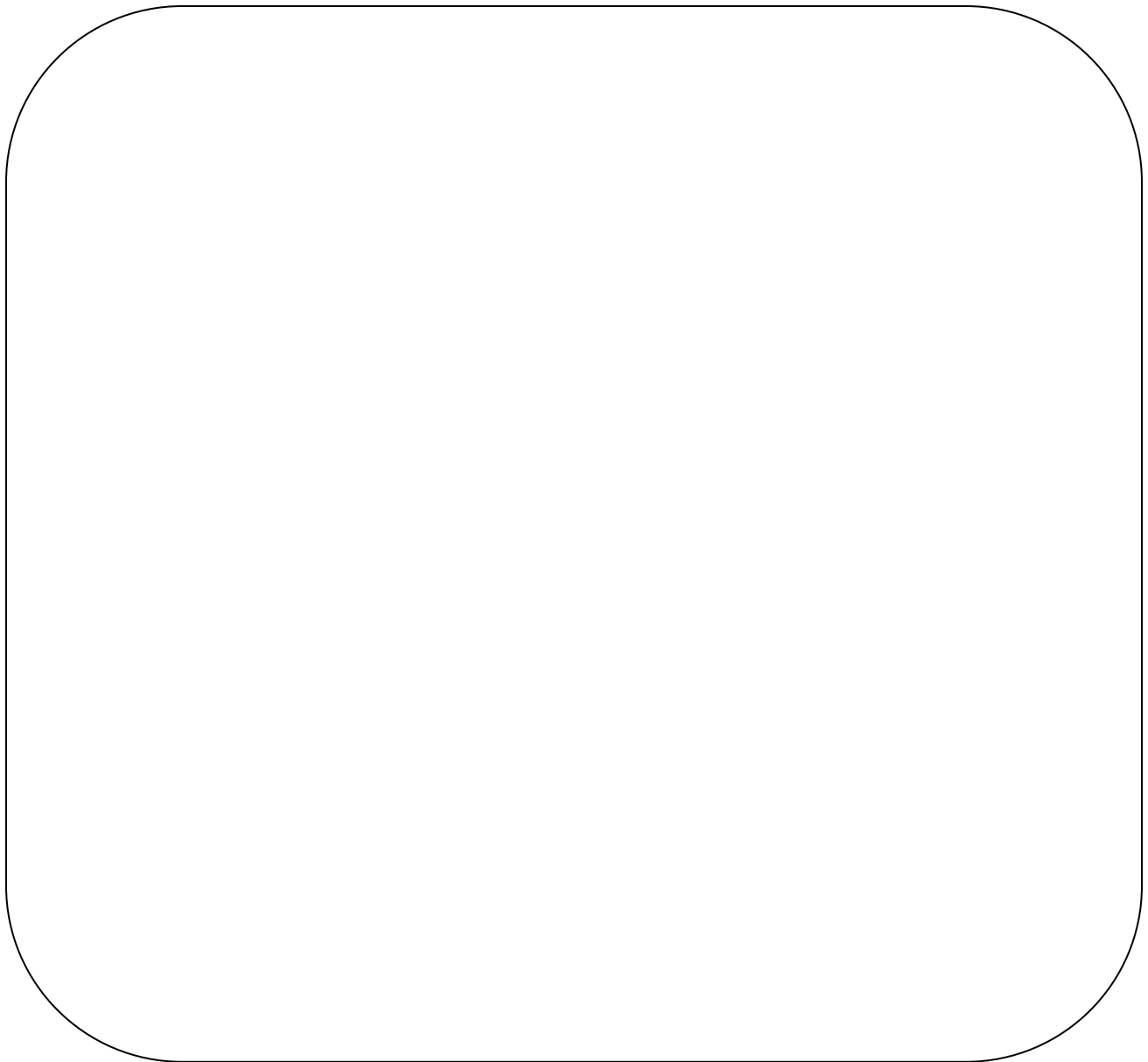
LEAVE BLANK – FOR MUNICIPAL USE ONLY				Inspections:		
Date Complete Application Received:	Fee Received: \$		Date Approved:		Principal	Accessory
	Receipt No.:			Front:		
	Permit No.:			Side:		
				Rear:		
				Side:		
				Building Height:		
				Building Coverage:		
				Impervious Surface Coverage:		

Project Plans

Permit # _____

- Site Plan.** A detailed drawing, drawn to scale, indicating lot lines, roads, driveways, sidewalks, buildings, structures, building setbacks, and any other pertinent information shall be submitted.
- Building Plans.** A detailed drawing, drawn to scale, indicating all floor plans, elevations, and any other pertinent information shall be submitted.
- Grading/Drainage Plan.** A detailed drawing, drawn to scale, indicating the ground elevation at the foundation and at all lot corners. All grades must be consistent with an approved grading/drainage plan for the subdivision, if one exists. If there is no grading/drainage plan, the average grade elevation of the adjacent lands must be maintained.

Site Plan.



Comments. _____ Date: _____

