



**COMMERCIAL
BUILDING PERMIT
APPLICATION**

PROJECT LOCATION _____
(road / street)

OWNER / LEASEE _____
(please print)

OWNER/ LEASEE'S ADDRESS _____
(number) (road / street)

(city) (state) (zip code) (phone) / ____ / ____
(date)

SIGNATURE: _____ CONTRACTOR INFORMATION: _____

| | |
|----|------------|
| \$ | TOTAL COST |
|----|------------|

| | |
|--|--|
| TYPE OF IMPROVEMENT (check one) | |
| <input type="checkbox"/> | NEW BUILDING |
| <input type="checkbox"/> | ADDITION |
| <input type="checkbox"/> | ALTERATION |
| <input type="checkbox"/> | REPAIR, REPLACE |
| <input type="checkbox"/> | MOVING |
| <input type="checkbox"/> | FOUNDATION |
| PROPOSED USE (check one) | |
| <input type="checkbox"/> | ASSEMBLY (50 or more) |
| <input type="checkbox"/> | BUSINESS |
| <input type="checkbox"/> | EDUCATIONAL (K - 12) |
| <input type="checkbox"/> | FACTORY |
| <input type="checkbox"/> | INSTITUTIONAL (Health Care/ Detention) |
| <input type="checkbox"/> | MERCANTILE (Retail) |
| <input type="checkbox"/> | STORAGE (Warehouse/Parking) |
| <input type="checkbox"/> | OTHER (tower etc.) |
| TYPE OF FRAME (check one) | |
| <input type="checkbox"/> | WOOD FRAME |
| <input type="checkbox"/> | STRUCTURAL STEEL |
| <input type="checkbox"/> | CONCRETE |
| <input type="checkbox"/> | OTHER |
| TYPE OF HEATING FUEL | |
| SPECIFY: | |
| TYPE OF SEWAGE DISPOSAL (check one) | |
| <input type="checkbox"/> | PUBLIC SYSTEM |
| <input type="checkbox"/> | PRIVATE SYSTEM |
| TYPE OF WATER SUPPLY (check one) | |
| <input type="checkbox"/> | PUBLIC SYSTEM |
| <input type="checkbox"/> | PRIVATE SYSTEM |
| DIMENSIONS | |
| <input type="checkbox"/> | NUMBER OF STORIES |
| <input type="checkbox"/> | TOTAL GROUND FLOOR AREA (sq. ft.) |
| <input type="checkbox"/> | TOTAL UPPER OF STORY AREAS (sq. ft.) |
| <input type="checkbox"/> | TOTAL IMPERVIOUS SURFACES (sq. ft.) |
| <input type="checkbox"/> | TOTAL # OF PARKING SPACES PROVIDED |

**THIS APPLICATION MUST BE ACCOMPANIED BY:
TWO (2) SETS OF STAMPED (A/E) PLANS
(A C.D. IF OVER FIVE PAGES)**

2009 INTERNATIONAL BUILDING CODE

TO BE COMPLETED BY CITY STAFF

| | | |
|--------------------------|------------------------|------------------|
| ZONING DATA | | |
| <input type="checkbox"/> | MAP | |
| <input type="checkbox"/> | LOT | |
| <input type="checkbox"/> | ZONING DISTRICT | |
| <input type="checkbox"/> | FRONT SETBACK | |
| <input type="checkbox"/> | SIDE / REAR SETBACKS | |
| CONSTRUCTION DATA | | |
| <input type="checkbox"/> | SPRINKLED | |
| <input type="checkbox"/> | HANDICAPPED | |
| <input type="checkbox"/> | IN 100 YEAR FLOOD ZONE | |
| <input type="checkbox"/> | PERMIT STATUS | |
| <input type="checkbox"/> | ZONING CLASS | |
| <input type="checkbox"/> | USE GROUP | |
| <input type="checkbox"/> | CONSTRUCTION TYPE | |
| <input type="checkbox"/> | IMPROVEMENT TYPE | |
| FEES | | |
| <input type="checkbox"/> | UNFINISHED AREAS | \$.05 p/sq. ft. |
| <input type="checkbox"/> | NEW CONSTRUCTION | \$.18 p/sq. ft. |
| <input type="checkbox"/> | RENOVATION | \$.13 p/sq. ft. |
| <input type="checkbox"/> | ACCESSORY&PARKING | \$.05 p/sq. ft. |
| <input type="checkbox"/> | LATE | DOUBLED |
| <input type="checkbox"/> | REVIEW FEE | \$ 30. |
| <input type="checkbox"/> | TOTAL FEE | |
| APPROVALS (Date) | | |
| <input type="checkbox"/> | SANITARY DISTRICT | |
| <input type="checkbox"/> | WATER DISTRICT | |
| <input type="checkbox"/> | CITY ENGINEER | |
| <input type="checkbox"/> | CEO / LPI | |

Name: _____ Location: _____ Map: _____ Lot: _____ Permit # _____