

CITY OF St. Bonifacius
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 <u>It is my responsibility to locate and establish the elevations if needed of all site improvements. Required adjustments at my expense.</u>		

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
 YES 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 St. Bonifacius applicable thereto.