



RESIDENTIAL/MULTI-FAMILY BUILDING PERMIT APPLICATION

PERMIT NO.	PAYMENT \$	DATE
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Property Owner: **(Please Print)** _____ Phone Number _____

Address: _____ CITY: _____ ST: _____ ZIP: _____ **Email:** _____

Job Site Information _____ Requested Water Meter Size (if new meter):
 Address: _____ $\frac{3}{4}$ " 1" 1 $\frac{1}{2}$ " 2"

Lot Number _____ Subdivision Name _____ Plat Designation _____

Existing Use of Property		Intended Use of Property	
<input type="checkbox"/> Vacant	<input type="checkbox"/> Multi-Family Units (PRD)	<input type="checkbox"/> Single Family	<input type="checkbox"/> Duplex/Twin Home
<input type="checkbox"/> Agricultural	<input type="checkbox"/> Commercial	<input type="checkbox"/> Other	<input type="checkbox"/> Mix Use (Commercial/Residence)
<input type="checkbox"/> Single Family	<input type="checkbox"/> Industrial	<input type="checkbox"/> Condominium # of Units _____	<input type="checkbox"/> Apartments # of Units _____
<input type="checkbox"/> Duplex	<input type="checkbox"/> Other:		

Type of Work: New Addition Alteration Interior Finish Demolition Other Describe: _____

FILL IN THE FOLLOWING INFORMATION AS IT PERTAINS TO THIS CONSTRUCTION ONLY – NOT TO THE EXISTING STRUCTURE

Type of Sewage: Public Private Type of Heating: Electric Natural Gas L.P.G. Wood Stove
 Is this a new service? Yes No Fireplace: Yes No Is this New Heating? Yes No

Owner Occupied: Yes No Garage: Yes No Attached: Yes No Square Footage of excavation _____ sq ft.
 Renter Occupied: Yes No Carport: Yes No Attached: Yes No

Number of Bedrooms/Units: _____ Number of Bathrooms: Full: $\frac{3}{4}$: $\frac{1}{2}$: Number of Stories Above Grade: _____ Office Use: SWPPP Needed? Yes No
 # of Dwelling Units on Lot _____

List other buildings now on the lot and the use of the buildings: _____ Estimated Value of the Project \$ _____

CONTRACTOR INFORMATION: (If Owner/Builder check here:)
 Name (as shown on Utah Contractor's License): _____
 Address: _____ City: _____ St: _____ ZIP: _____
 E-Mail Address: _____
 Phone Number: _____ Cell Phone: _____ License Number: _____

ARCHITECT INFORMATION*:
 Name: _____
 Address: _____ City: _____ St: _____ ZIP: _____
 Phone Number: _____ License Number: _____

ENGINEER INFORMATION*:
 Name: _____
 Address: _____ City: _____ St: _____ ZIP: _____
 Phone Number: _____ License Number: _____

*All commercial plans and all residential plans with multiple dwelling units of four (4) or more dwelling units must have an architect and/or engineer seal.
 COMMENTS: _____

Decisions relative to this application are subject to review by the chief executive officer of the municipal entity issuing the single-family residential building permit and appeal under the International Residential Code.