

SAUNDERS COUNTY PLANNING & ZONING

Building Permit Application

Permits when issued are **non-transferable**.

Application# _____

Date: _____

Property Owner: _____	Contractor: _____
Mailing Address: _____	Address: _____
City: _____ State: _____ Zip: _____	City: _____ State: _____ Zip: _____
Phone: _____	Phone: _____
Email: _____	Email: _____

Section _____ Township _____ Range _____ Subdivision _____ Lot # _____

PROJECT INFORMATION

PROPOSED STRUCTURE _____

PROPOSED USE _____

FINISHED SQ. FT. _____

UNFINISHED SQ. FT. _____

GARAGE SQ. FT. _____

PORCH/DECK SQ. FT. _____

EST. COST OF PROJECT \$ _____

APPLICANT REQUIREMENTS FOR SUBMITTAL:

- COMPLETE SET OF BLUEPRINTS
(FOUNDATION, PLUMBING, ELECTRIC, FRAMING, ETC.)
- PLOT PLAN W/ LOT DIMENSIONS, SETBACKS TO ALL
STRUCTURES AND DIMENSIONS L-W-H
- COMPLETE LIST OF ALL CONTRACTORS &
SUBCONTRACTORS

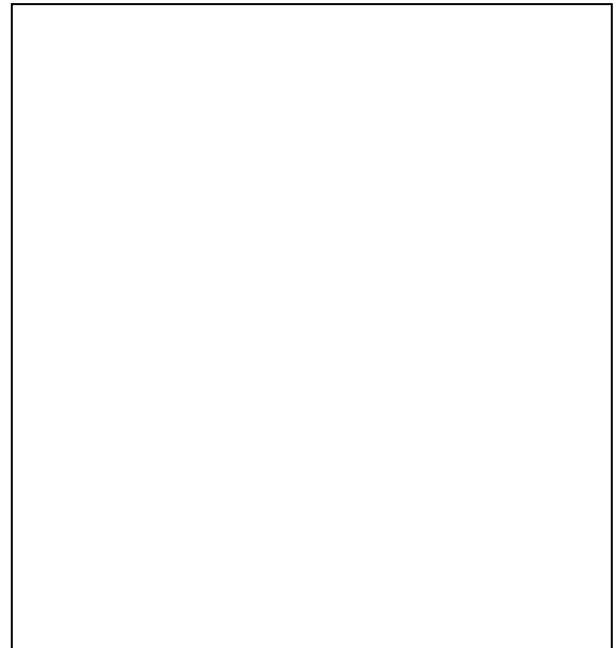


DIAGRAM SKETCH

FOR OFFICE USE ONLY:

ZONING DISTRICT _____ FLOOD DISTRICT Y () N () PANEL NO. _____
DOES STRUCTURE AND USE COMPLY WITH ZONING DISTRICT Y () N ()
SPECIAL REMARKS _____

FEE COLLECTED Y () N () AMOUNT \$ _____ DUE \$ _____
PERMIT GRANTED () NUMBER _____ PERMIT DENIED ()
REASON FOR DENIAL _____

BUILDING INSPECTOR/ZONING ADMINISTRATOR _____
DATE OF REVIEW _____

MAIL PERMIT TO:
HOMEOWNER _____
CONTRACTOR _____
EMAIL _____