

SAUNDERS COUNTY PLANNING & ZONING

Building Permit Application

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

Application# _____

Date: _____

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

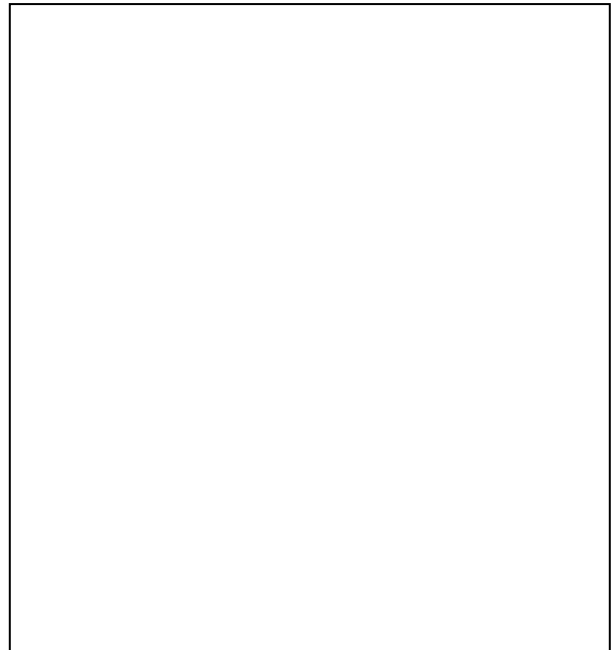


DIAGRAM SKETCH

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 _____
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