

TO BE COMPLETED BY APPLICANT



DOCK BUILDING PERMIT APPLICATION

Name: _____
 Site Address: _____
 Contractor _____ Phone: _____
 Address: _____ City, State, Zip _____
 Description of Work: _____

Project Valuation \$ _____

Notice

This permit becomes null and void if work or construction authorized is not commenced within 180 days, or if construction or work is suspended or abandoned for a period of 180 days at any time after work is commenced.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Signature of Owner/Contractor

Date

TO BE COMPLETED BY STAFF

Type of Const.	Occupancy/Division	NO.	Type	FEE
Bldg. Sq. Ft.	Occupancy Load		Dock Building Permit	\$25.00
Bsmt. Sq. Ft.	# of Stories		Plan Review	
Garage Sq. Ft.	# of Dwelling Units		Electric Permit	
Use Zone			Plumbing Permit	
Special Conditions:			Mechanical Permit	
			Water Meter Size:	
			Water System Development	
			Sewer System Development	
			Sewer Tap	
			Temporary Power	
			Electric Service: _____ AMP	
			Park Impact Fee	
Approved By	Date Approved		TOTAL PERMIT FEE	

PERMIT # _____