

# BUILDING PERMIT APPLICATION

City of Vinton, Iowa

1. JOB ADDRESS							
ADDITION		LOT NO.		BLOCK			
2. OWNER		MAIL ADDRESS		ZIP	PHONE		
3. CONTRACTOR		MAIL ADDRESS		ZIP	PHONE		
4. ARCHITECT OR DESIGNER		MAIL ADDRESS		ZIP	PHONE		
5. ENGINEER		MAIL ADDRESS		ZIP	PHONE		
6. LENDER		MAIL ADDRESS		ZIP	PHONE		
7. PROPOSED USE OR OCCUPANCY OF BUILDING							
8. CLASS OF WORK	NEW	ADDITION	ALTERATION	REPAIR	MOVE	TEMPORARY	REMOVE
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. DESCRIBE WORK							
10. CHANGE OF USE FROM							
CHANGE OF USE TO							
11. VALUE			PERMIT FEE \$				
ACCEPTED BY	CHECKED BY	APPROVED BY	TYPE OF CONST.	OCCUPANCY GROUP	DIVISION		
<p style="font-size: small; margin: 0;">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. IT IS THE DUTY OF THE PERSON DOING THE WORK AUTHORIZED BY A PERMIT TO NOTIFY THE BUILDING OFFICIAL THAT SUCH WORK IS READY FOR INSPECTION. 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.</p>			SIZE OF BLDG. (SQFT)	NO. STORIES	MAX OCC. LOAD		
			NO. OF DWELLING UNITS	ZONING	SPRINKLERS	YES	NO
			OFFSTREET PARKING SPACES		COVERED	UNCOVERED	
			SPECIAL APPROVALS		REQUIRED	RECEIVED	NOT REQUIRED
			ZONING				
			PLOT PLAN				
			ELEVATION CERTIFICATION				
			OTHER				

SIGNATURE OF CONTRACTOR OR AUTHORIZED AGENT

\_\_\_\_\_  
SIGNATURE OF OWNER (IF OWNER BUILDER)

\_\_\_\_\_  
DATE

SIGNATURE OF BUILDING INSPECTOR

\_\_\_\_\_  
DATE