



DATE	BUILDING PERMIT APPLICATION		PERMIT NUMBER
1. JOB ADDRESS	SUBDIVISION		LOT #
2. PROPERTY OWNER	MAILING ADDRESS	PHONE	
		EMAIL	
3. CONTRACTOR	MAILING ADDRESS	PHONE	
		EMAIL	
4. USE <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL	TYPE OF WORK <input type="checkbox"/> NEW <input type="checkbox"/> ADDITION <input type="checkbox"/> REMODEL <input type="checkbox"/> FOUNDATION <input type="checkbox"/> RE-ROOF <input type="checkbox"/> OTHER		
5. PROJECT DESCRIPTION		FLOOD ZONE <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, YOU MUST SUBMIT A FLOOD PLAIN PERMIT APPLICATION	
6. SQUARE FOOTAGE: RESIDENCE _____ GARAGE _____ BASEMENT _____ OTHER _____			
7. CHANGE OF USE FROM _____ TO _____			
8. TOTAL VALUATION \$ _____	AND COST OF MATERIALS \$ _____	SETBACKS FRONT _____ REAR _____ SIDE _____ CORNER _____	
<p>9. By signing below, I acknowledge the following, as applicable:</p> <p><input type="checkbox"/> SEPARATE PERMITS ARE REQUIRED BY THE CITY FOR ELECTRICAL, SOLAR, AND MECHANICAL WORK.</p> <p><input type="checkbox"/> A SEPARATE PERMIT IS REQUIRED BY THE STATE FOR PLUMBING WORK.</p> <p><input type="checkbox"/> 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.</p> <p><input type="checkbox"/> The issuance of a permit and specifications of terms and conditions therein shall not constitute assumption or create presumption that the local building department or its employees may be liable for the failure of any structure, nor act as certification that the materials used in the structure or any of its components thereof, or that the structure for which the permit was issued insures continuous compliance with the provisions of the Codes as adopted by the City of Delta.</p> <p><input type="checkbox"/> HOMEOWNER CLAUSE: Whenever a homeowner is issued a building permit for any construction within the City of Delta, the homeowner listed on the permit carries the responsibility for all of the construction work, and for ensuring that all facets of the project conform to the applicable regulations and Codes of the City of Delta. Additionally, the homeowner carries the responsibility and liability of scheduling and providing necessary access for inspections.</p> <p><input type="checkbox"/> PERMIT FEES: Building fees are set by the City's Fee Schedule. When plan review is required, re-reviews will be charged to the applicant at an hourly rate of \$47.00 per hour or the total cost to the City.</p> <p><input type="checkbox"/> I do not know if an asbestos inspection has been conducted on the building materials that will be disturbed by this project</p> <p><input type="checkbox"/> An asbestos inspection has been conducted on the building materials that will be disturbed by this project on or about: _____</p> <p><input type="checkbox"/> An asbestos inspection has NOT been conducted on the building materials that will be disturbed by this project.</p> <p>I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws, Codes, 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 entity regulating construction or the performance of construction.</p> <p>SIGNATURE: _____ DATE: _____</p> <p style="text-align:center;"><input type="checkbox"/> OWNER <input type="checkbox"/> CONTRACTOR/AGENT</p>			
----- FOR OFFICE USE ONLY -----			
SITE DEVELOPMENT REVIEW			
Date:	Signature	Comments	
CONSTRUCTION TYPE <input type="checkbox"/> IA <input type="checkbox"/> IB <input type="checkbox"/> IIA <input type="checkbox"/> IIB <input type="checkbox"/> IIIA <input type="checkbox"/> IIIB <input type="checkbox"/> IV <input type="checkbox"/> VA <input type="checkbox"/> VB <input type="checkbox"/> OTHER _____			
OCCUPANCY TYPE <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> E <input type="checkbox"/> F <input type="checkbox"/> H <input type="checkbox"/> I <input type="checkbox"/> M <input type="checkbox"/> R <input type="checkbox"/> S <input type="checkbox"/> U			OCCUPANCY LOAD
FIRE SPRINKLERS REQUIRED <input type="checkbox"/> YES <input type="checkbox"/> NO	FLOOD PLAIN <input type="checkbox"/> YES <input type="checkbox"/> NO	PLAN REVIEW <input type="checkbox"/> IN-HOUSE <input type="checkbox"/> OTHER	ZONING