

APPLICATION DATE _____

PERMIT # _____

~ CITY of WILLARD ~

ONE AND TWO-FAMILY NEW RESIDENTIAL
BUILDING PERMIT APPLICATION

PROPERTY INFORMATION

ZONING: _____ SITE ADDRESS: _____

SUBDIVISION: _____ LOT #: _____

IF PROPERTY IS NOT LOCATED IN A SUBDIVISION, THE LEGAL DESCRIPTION & PARCEL NUMBER MUST BE ATTACHED

APPLICANT & CONTRACTOR INFORMATION

• OWNER: _____ BUSINESS/COMPANY: _____

ADDRESS (CITY, STATE, ZIP): _____ PHONE: _____

• GENERAL CONTRACTOR: _____ PHONE: _____

ADDRESS (CITY, STATE, ZIP): _____ CITY LICENSE # _____

• ELECTRICAL CONTRACTOR: _____ PHONE _____

ADDRESS (CITY, STATE, ZIP): _____ CITY LICENSE # _____

• PLUMBING CONTRACTOR: _____ PHONE _____

ADDRESS (CITY, STATE, ZIP): _____ CITY LICENSE # _____

• MECHANICAL CONTRACTOR: _____ PHONE: _____

ADDRESS (CITY, STATE, ZIP): _____ CITY LICENSE # _____

**A SITE PLAN, FOUNDATION PLAN AND ELEVATION PLAN MUST BE SUBMITTED WITH YOUR APPLICATION
ALL CONTRACTORS MUST OBTAIN A WILLARD CITY BUSINESS LICENSE PRIOR TO COMMENCING WORK**

- New Residence (requires floor plans to be onsite)
- Residential Addition, Remodel/Repair Description of work being done _____

- New Residential Single Family Home: Requires 2 site plans.
- New Duplex (Issued as one permit): Requires one site plan showing type of UL Fire Suppression Wall used.
* UL # _____.
- New Patio Home, Zero lot line home, condo (Issued as separate permits): Requires one site plan for each patio home showing the type of UL Fire Separation Wall used. UL# _____.

NOTE: Location of the driveway must be shown on all site plans.

Building Information

Number of Sq Ft. for: main level _____ 2nd level _____ Finished basement _____
Unfinished basement _____ Garage/carport _____ Covered patio/porch _____

Building Setback: Front yard _____ ft. Back yard _____ ft. Side yard _____ ft. Side yard _____ ft.

Number of: Furnaces _____ Water heaters _____ Gas openings _____ Gas logs/fireplaces _____
Sinks _____ Bathrooms _____.

Electric Service Size _____ Amps

Total cost of Project _____

OFFICE USE ONLY: BUILDING STRUCTURE & LOT INFORMATION

- | | | |
|--|--|----------------------|
| <input type="checkbox"/> SINGLE FAMILY | <input type="checkbox"/> CORNER LOT | RIGHT SETBACK: _____ |
| <input type="checkbox"/> DUPLEX | <input type="checkbox"/> INTERIOR LOT | LEFT SETBACK: _____ |
| <input type="checkbox"/> ZERO LOT LINE
LOCATED IN FLOODPLAIN <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> CONSTRUCTION TYPE | FRONT SETBACK: _____ |
| | | REAR SETBACK: _____ |

PERMITS NEEDED

- Plumbing Electrical Mechanical Gas Business License (if applicable)

BUILDING PERMIT CALCULATION

_____	ICC BVD		_____
	X FORMULA	=	
Total Square Feet			Total Building Permit
BUILDING PERMIT FEE			_____
OTHER FEES		+	_____
TOTAL FEES DUE		=	_____

OTHER FEES

- WATER CONNECTION \$ _____
- SEWER CONNECTION \$ _____
- PARK FEE \$ _____
- INFRASTRUCTURE FEE \$ _____

I HEREBY CERTIFY THAT THE INFORMATION PROVIDED ON THIS APPLICATION IS TRUE AND CORRECT; THAT I HAVE READ AND UNDERSTAND THE PROCEDURES, ORDINANCES, AND REQUIREMENTS ASSOCIATED WITH THE APPLICATION AND REVIEW PROCESS. I ALSO UNDERSTAND THAT THIS APPLICATION WILL EXPIRE WITHIN 180 DAYS OF THE DATE OF MY SIGNING, UNLESS EXTENDED BY THE BUILDING INSPECTOR PURSUANT TO A WRITTEN REQUEST FOR EXTENSION RECEIVED PRIOR TO THE EXPIRATION DATE. FURTHERMORE, I ACKNOWLEDGE THAT I WILL BE RESPONSIBLE FOR ANY AND ALL COSTS INCURRED BY PLAN REVIEWS PERFORMED BY CONSULTANTS OF THE CITY, CERTIFIED MAILING OR PUBLICATION COSTS FOR REQUIRED LEGAL NOTICE, AND RECORDING FEES. THESE COSTS MAY BE PAID BY THE CITY AND REIMBURSED BY THE APPLICANT UPON INVOICING.

Owner /Contractor _____ Date: _____