



Springville City Corporation
 Community Development Department
 Building & Inspections

Building Permit Application

Owner				Phone No.									
Owner's Mailing Address				City/State/Zip									
JOB SITE – Address													
Lot No.		Subdivision			Tax Serial No.								
Existing Use of Parcel				Intended Use of Parcel									
<input type="checkbox"/>	Vacant	<input type="checkbox"/>	Commercial	<input type="checkbox"/>	Agricultural	<input type="checkbox"/>	Commercial						
<input type="checkbox"/>	Agricultural	<input type="checkbox"/>	Industrial	<input type="checkbox"/>	Single-Family	<input type="checkbox"/>	Industrial						
<input type="checkbox"/>	Single-Family	<input type="checkbox"/>	Other - Specify	<input type="checkbox"/>	Twin-Home	<input type="checkbox"/>	Other - Specify						
<input type="checkbox"/>	Duplex	<input type="checkbox"/>		<input type="checkbox"/>	Duplex	<input type="checkbox"/>							
<input type="checkbox"/>	Multiple Units	<input type="checkbox"/>		<input type="checkbox"/>	Multiple Units	<input type="checkbox"/>							
No. Dwelling Units		Owner Occupied or Rental		No. Bedrooms		No. Stories							
						Occupant Load							
Bldg. Dimensions x		Carport/Garage Dim. X		Attached Yes No		No. Off-Street Parking Spaces							
						Fireplace Yes No							
Lot Dimensions		No. Dwelling Units Now on Lot		Other Buildings Now on Lot and Use									
Contractor			Phone No.			License No.							
Contractor Mailing Address				City/State/Zip									
Architect/Engineer						Phone No.							
Mailing Address				City/State/Zip									
Floor		Ext Walls		Int. Walls		Ceiling		Roof		Heating		Sewer	
<input type="checkbox"/>	Concrete	<input type="checkbox"/>	Masonry	<input type="checkbox"/>	Masonry	<input type="checkbox"/>	Open Beam	<input type="checkbox"/>	Wood Shingle	<input type="checkbox"/>	Electric	<input type="checkbox"/>	Public
<input type="checkbox"/>	Wood	<input type="checkbox"/>	Frame	<input type="checkbox"/>	Frame	<input type="checkbox"/>	Plaster	<input type="checkbox"/>	Comp. Shingle	<input type="checkbox"/>	Nat. Gas	<input type="checkbox"/>	Private
<input type="checkbox"/>		<input type="checkbox"/>	Stucco	<input type="checkbox"/>	Plaster	<input type="checkbox"/>	Sheetrock	<input type="checkbox"/>	Built-up	<input type="checkbox"/>	L.P.G.	<input type="checkbox"/>	
<input type="checkbox"/>		<input type="checkbox"/>	Siding	<input type="checkbox"/>	Sheetrock	<input type="checkbox"/>	Wood	<input type="checkbox"/>	Wood	<input type="checkbox"/>	Oil	<input type="checkbox"/>	
<input type="checkbox"/>		<input type="checkbox"/>	Metal	<input type="checkbox"/>	Wood	<input type="checkbox"/>	Fiber Board	<input type="checkbox"/>	Shake	<input type="checkbox"/>	Solid	<input type="checkbox"/>	
Briefly describe type of work to be done:													
APPLICANT PLEASE READ CAREFULLY													
I agree to comply with all City, County and State Building Laws and Ordinances, and that the representation in this application for a building permit are true and accurate, and any misrepresentations or errors herein are the sole responsibility of the applicant, and shall in no way incur or accrue liability or obligation to enforcing officers or agents.													
This permit becomes null and void if work on 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.													
OCCUPANCY OF STRUCTURE IS PROHIBITED UNTIL AFTER FINAL INSPECTION AND ZONING AND OCCUPANCY COMPLIANCE CERTIFICATE IS ISSUED.													
I HAVE CHECKED THE SEWER DEPTH OF ABOVE LOT AND WILL TAKE ALL RESPONSIBILITY FOR SETTING BUILDING ACCORDINGLY.													
Owner's Signature _____ Date _____													
Contractor's Signature _____ Date _____													