

VERNAL CITY

BUILDING PERMIT APPLICATION

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Effective August 13, 2008, the City of Vernal is implementing a new computer system for issuing building permits. In order to apply for a permit, you must complete the form below.

Parcel Id#: _____ Residential Commercial New Existing

Brief description of work to be done: _____

Address: _____

Unit # (if any): _____ Lot or Building # (if any): _____

Current Zoning: _____ Subdivision/ Business: _____

Name of Owner: _____

Address of Owner: _____

City, State, Zip: _____ Phone: _____

Name of Applicant (if different from Owner): _____ Date of Application: _____

Value of Work (if applicable): \$ _____

Architect Name/Phone: _____

What (if anything) is on the property now? (i.e., house, restaurant, etc):

If Applicable:

General Contractor Name: _____

Phone#: _____ State License #: _____

Plumbing Contractor Name: _____

Phone#: _____ State License #: _____

Mechanical Contractor Name: _____

Phone#: _____ State License #: _____

Electrical Contractor Name: _____

Phone#: _____ State License #: _____

(Please fill out the Contractor Information Form to supply your address, and other required information; if you have not already done so.)

(APPLICATION CONTINUED ON REVERSE OR FOLLOWING PAGE)

For New Residential Construction:

of Stories: _____ # of Bedrooms _____

Sprinkler System?: Y _____ N _____ Sprinkler System Sq Footage: _____

If Applicable:

of Buildings: _____ # of Units: _____

If Applicable: Square Footage Per Floor (Including Decks):

Unf Bsmt: _____ 4th Floor: _____

1st Floor: _____ Covr Porch/Deck: _____

2nd Floor: _____ Fin Bsmt: _____

3rd Floor: _____ Garage: _____

Any other information needed: _____

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Thank you for completing this application. It will be processed as quickly as possible.
** Requests for inspections will not be scheduled unless the permit number is supplied at the time of the request.

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Applicant's Signature: _____ Date: _____

Phone: _____ Cell: _____

For Internal Use Only:

Comments/Conditions: _____

Entered By: _____

Permit #: _____

Approval By: _____ Date: _____