

Sawyer Planning/Zoning Commission

Application for Permit - Building or Moving

Sawyer, North Dakota

I hereby agree to comply with all City of Sawyer ordinances and federal and state laws regulating building construction. I understand that this application is to be acted upon by the city building officials and NO construction shall begin until they have had reasonable time to inspect such application and issue the permit to construct. Please allow three (3) to seven (7) days for permit approval.

To the best of my knowledge all information contained herein is complete and true.

Within one year from the date this permit is issued, all dirt work must be completed and the structure will be enclosed. Failure to comply may result in a fine of not more than \$200 per day.

Print Full Name _____ Phone # _____

Signature _____

LOCATION AND DESCRIPTION			TYPE OF CONSTRUCTION											
Address _____			New	No. of Families	Footing									
Lot _____ Block _____				Alteration	No. of Rooms	Height								
Addition _____			Addition	Size	Rafters									
Size of Lot _____			Repair	Stories	Joists									
Size of Building or Addition _____			Moving	Wall Covering										
Demolish			Roof Covering											
Set Back <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 33%;">SIDE</th> <th style="width: 33%;">FRONT</th> <th style="width: 33%;">SIDE</th> </tr> </thead> <tbody> <tr> <td style="height: 20px;">1.</td> <td></td> <td></td> </tr> <tr> <td style="height: 20px;">2.</td> <td></td> <td></td> </tr> </tbody> </table> All water and sewer lines must be inspected before backfilling. Inspector must be given 48-hour notice. Inspected by _____ Date _____			SIDE	FRONT	SIDE	1.			2.			TOTAL VALUE including labor, material, wiring, heating, plumbing, etc. \$ _____ <i>Subject to approval of building inspector</i> APPLICANT: Please draw a map of the proposed construction of the plan on the reverse side of this application		
SIDE	FRONT	SIDE												
1.														
2.														

☐ APPROVED
 ☐ REJECTED

THIS PERMIT IS VALID FOR TWELVE (12) MONTHS FROM DATE ISSUED

Mayor _____

Inspector _____

Surveyor _____

APPLICATION FEE	PLAN ACCEPTED	PERMIT NO.	DATE ISSUED	APPEALED
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FINAL APPROVAL

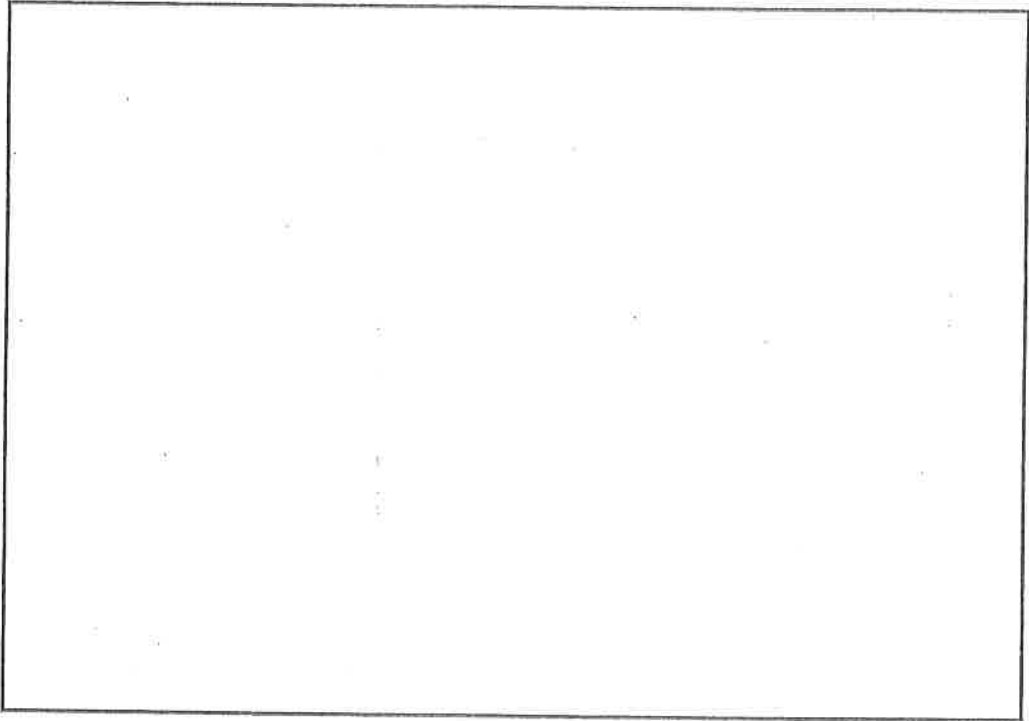
Building Inspector _____ Date _____

Applicant: Show present buildings and additions (etc.)

Show footage from front line to addition

FRONT OF LOT

Street Address _____



USE OF BUILDING	DESCRIPTION OF WORK