

CITY OF ROCKFORD BUILDING PERMIT

Permit No. _____

Date _____

CONTRACTOR'S LICENSE NO.		1. DATE	
2. SITE ADDRESS			
3. LEGAL DESCRIPTION PROPERTY I.D. NO. SECTION _____ LOT _____ BLOCK _____ ADDITION _____ PLAT NUMBER _____ PARCEL NUMBER _____			
4. OWNER (Name)		(Address) (Tel. No.)	
5. ARCHITECT (Name)		(Address) (Tel. No.)	
6. BUILDER (Name)		(Address) (Tel. No.)	
7. TYPE OF WORK Fireplace <input type="checkbox"/> Septic <input type="checkbox"/> Heating <input type="checkbox"/> Plumbing <input type="checkbox"/> Reroofing <input type="checkbox"/> New Construction <input type="checkbox"/> Alterations <input type="checkbox"/> Addition <input type="checkbox"/> Finish Basement <input type="checkbox"/> Residing <input type="checkbox"/> Deck <input type="checkbox"/> Porch <input type="checkbox"/> Garage <input type="checkbox"/> Chimney <input type="checkbox"/> Misc. _____			
8. SIZE OF STRUCTURE (Height) (Width) (Depth)		9. NO. OF STORIES	
11. COMPLETION DATE		10. ESTIMATED VALUE	
12. PROPERTY DIMENSION Width _____ Depth _____		13. NO. OF FAMILIES (if applicable)	
14. PROPOSED ELEVATION IN RELATION TO CURB OR WATERWAY. _____ ELEV.		15. PROPERTY AREA OR ACRES Sq. Ft. _____	
16. CULVERT SIZE Yes _____ No _____		17. FRONT YARD set back from road property Ft. _____	
18. REAR YARD set back Ft. _____		19. SIDE YARDS set back _____ Right Sd. _____ Left Sd.	
20. FLOOR AREA APPORTIONMENT USE AREA _____ Sq. Ft. _____ Sq. Ft. _____ Sq. Ft. AGGREGATE FLOOR AREA _____ Sq. Ft.			
SPECIAL CONDITIONS <u>It is my responsibility to locate and establish the elevations if needed of all site improvements. Required adjustments at my expense.</u>			

FEES	
PERMIT FEE _____	
PLAN CHECK FEE _____	
PENALTY FEE _____	
ENGINEERING FEE _____	
SITE FEE _____	
DRIVEWAY FEE _____	
CULVERT \$ _____	
FIREPLACE _____ /SC _____	
PLUMBING FEE _____ /SC _____	
SEPTIC FEE _____	
MECHANICAL FEE _____ /SC _____	
WATER METER FEE _____	
WATER FEE _____	
SEWER FEE _____	
SURCHARGE FEE _____	
ADMIN. FEE _____	
OTHERS _____	
CONTRACTORS LICENSE _____	
TOTAL FEE _____	

CODE ANALYSIS	
TYPE OF CONST. _____	
USE OF BLDG. _____	
OCCUPANCY GROUP _____	
OCCUPANCY LOAD _____	

ZONING DISTRICT

VARIANCE GRANTED, DATE

OFF STREET PARKING	
SPACES REQ. _____	
SPACES ON PLAN _____	

MATERIAL FILED W/APPLICATION	
SOILS REPORT <input type="checkbox"/> Borings	
<input type="checkbox"/> Percolation	
<input type="checkbox"/> Compaction tests	
PLANS AND SPECS. <input type="checkbox"/> Sets _____	
SURVEY <input type="checkbox"/> Copies _____	
ENERGY CALCULATIONS <input type="checkbox"/>	
PILING LOGS <input type="checkbox"/>	

FIRE SPRINKLERS REQUIRED	
<input type="checkbox"/> YES <input type="checkbox"/> NO	

SPECIAL APPROVALS	
ZONINGS _____	
FIRE DEPT. _____	
HEALTH DEPT. _____	
PUBLIC WORKS _____	
COUNTY _____	
OTHER _____	

CERTIFICATE OF OCCUPANCY ISSUED	
DATE _____	BY _____

ACKNOWLEDGMENT AND SIGNATURE:

The undersigned hereby agrees that, in case such permit is granted, that all work which shall be done and all materials which shall be used shall comply with the plans and specifications therefor herewith submitted and with all the ordinances of said City _____ applicable thereto.

SIGNATURE OF APPLICANT

APPROVED BY BUILDING INSPECTOR