



BUILDING PERMIT APPLICATION

Permit No. _____ Fee _____ Date _____

I. **Location of Building:** _____
Number Street Tax Map Lot #

II. **Type of Building** **All applicants complete parts: A, B, C, D, E, F,G,H, & I**

A. Improvement

- New Building
- Addition
- Alteration
- Repair
- Demolition
- Moving
- Foundation

B. Ownership

- Public
- Private

C. Septic System

- Public
- Private

D. Water Supply

- Public
- Private

E. Shoreland Zone

- Outside
- Within

F. Wellhead Zone

- Outside
- With-in 250'

G. Proposed Uses

Residential Uses:

- Single Family Dwelling
- No. of bedrooms (_____)
- Manufactured Home
- Mobile Home
- Tiny Home
- Two Family Dwelling
- No. of bedrooms (_____)
- Townhouses
- Residential Accessory
- Family Day Care
- Home Occupation
- Other

H. Estimated Cost

\$ _____

Non-Residential Uses:

- Assembly (> 1,000 seats)
- Assembly (300 to 999 seats)
- Assembly (50 to 299 seats)
- Business (Bank, Office, and Retail)
- Business (Restaurant < 49 seats)
- Educational – School
- Educational – Group Day Care
- Educational – Day Care Center
- Factory
- High Hazard
- Institutional – Hospital
- Institutional – Nursing Home
- Mercantile – (<3,000 Sq. Ft.)
- Mercantile – (3,001 to 29,000 Sq. Ft.)
- Mercantile – (>30,000 Sq. Ft.)
- Multi-family – (>2 Dwelling Units)
- Multi-family – Hotel, Motel, Inn
- Storage
- Tank
- Tower
- Utility

I. **Description of Improvement** _____

III. **Identification:**

_____ (_____) _____
Applicants Name Phone

_____ _____ _____ _____ _____
Number Street Mailing Address City / Town State Zip Code

_____ _____
Signature of Applicant Date

IV. **Design Criteria:**

Ground Snow Load P/Sq. Ft.	Wind Design Speed (MPH)	Seismic Design Category	Weathering	Frost Line Depth	Ice Barrier Required	Flood Hazards	Air Freezing Index	Mean Annual Temperature
70 Lbs.	90	B	Severe	4 feet	Yes	Possible	2500	46°

V. **Energy Conservation:**

Climate Zone	Glass U-Factor	Ceiling Trusses	Basement Wall	Wood Frame Wall	Wood Floor	Slab
6	0.32	Standard R-49 Raised Heel R-38	R-15/19	Insulation in the Cavity Wall + Continuous: R-20 + 5 or R-13 + 10	R-30	R-10 @ 4'

