COALVILLE CITY BUILDING PERMIT APPLICATION

Phone 435-336-5981 Fax 435-336-2062

Note: A minimum 24 hour notice is required on all inspection requests

Owner of Property:	Phone: _____
Mailing Address:	
Bldg. Address:	

Proposed use of Structure:	Assessors Parcel No.

Subd. Name:	Lot #	Date of Application
Acres in Parcel	Building Footprint	

# of Bldgs. now on site	# of Dwellings now on site	# of out Bldgs on site

Type of Improvement/ Construction

Sign: _____ New Const: _____ Remodel: _____

Repair: _____ Move: _____ T/I: _____

Addition: _____ Demo: _____

Architect or Engineer: _____

Area Code: _____ Phone: _____

General Contractor: _____

Address: _____

_____

_____

Lic. No.: _____

Area Code: _____ Phone: _____

Electrician: _____

Area Code: _____ Phone: _____

Lic. No.: _____

Plumber: _____

Area Code: _____ Phone: _____

Lic. No.: _____

HVAC: _____

Area Code: _____ Phone: _____

Lic. No.: _____

This permit becomes null and void if work or construction is not commenced within 180 days after permit has been issued, or if construction is suspended or abandoned for a period of 180 days at any time after work has begun. I hereby certify that I have read and examined this application and know the same to be true and correct.

_____ _____

Signature of Contractor Date

_____ _____

Signature of Owner Date

(Make Checks Payable to Coalville City)

This side of form for office use only!

Permit Number	Date Issued	Utah State Permit Number

Square feet of building:

Finished Bsmt	
Main Level	
2nd Floor	
3rd	
Garage	
Deck	
Other	

Number of Dwellings:	
Occupancy:	
Number of Stories:	
Type Construction:	
Roof Snow Load:	

Other Requirements:

Fees for Building Permit:

Valuation	
Building Fee	
Plan Review	
Electrical	
Plumbing	
HVAC	
Permitted Use	
Water	
Sewer	
Demolition	
Double Fee	
State 1%	
Sub Total:	
Impact Fees:	
Culinary Water	
Sewer	
Sub Total:	
Total:	

Approvals:

Zoning: Zoning District: _____

Setbacks: Front Yard: _____ Rear Yard: _____

Side Yards:

Left: _____ Right: _____

_____ _____

Community Development Director Date

Public Works:

_____ _____

Public Works Representative Date

Building:

_____ _____

Building Representative Date

Comments: _____

_____

_____