



OAKLEY CITY BUILDING PERMIT APPLICATION

Phone: 435-783-5734

Note: 24 hours notice is required for all inspections.

Owner of Property		Phone
Mailing Address		City
Bldg. Address		
Proposed Use of Structure		
Lot #	Plat	Subd. Name
Property Location		
Total Property Area in Acres of Sq. Ft.		Total Bldg. Site Area Used
Date of Application		Date Work Begins
Previous Use of Land or Structure		
Dwell Units Now on Lot		Assessory Bldgs. Now on Lot
Type of Improvement/Kind of Const.		
<input type="checkbox"/> Sign <input type="checkbox"/> New Construction <input type="checkbox"/> Remodel <input type="checkbox"/> Addition <input type="checkbox"/> Repair <input type="checkbox"/> Move <input type="checkbox"/> Convert Use <input type="checkbox"/> Demolish		
No. of Offstreet Parking Spaces: Covered Uncovered		
Architect or Engineer		Phone
Business Name-Address		City/Co. Lic. No.
General Contractor		Phone
Business Address	State Lic. No.	City/Co. Lic. No.
Electrical Contractor		Phone
Business Address		City/Co. Lic. No.
Plumbing Contractor		Phone
Business Address		City/Co. Lic. No.
Mechanical Contractor		Phone
Business Address		City/Co. Lic. No.

Receipt No.	Date Issued	Permit Number
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BUILDING FEE SCHEDULE

Square Ft. of Building	Valuation
Main Floor	Building Fees
<input type="checkbox"/> Finish Basement	Plan Check Fees
Carport Sq. Ft.	Electrical Fees
Garage Sq. Ft.	Plumbing Fees
Other	Mechanical Fees
Type of Bldg.	Water
No. of Dwellings	Sewer
	Storm Sewer
Occ. Group	Moving or Demo
Type of Construction	Temporary Conn.
<input type="checkbox"/> Frame <input type="checkbox"/> Brick Ven. <input type="checkbox"/> Log	Reinspection
<input type="checkbox"/> Brick <input type="checkbox"/> Block <input type="checkbox"/> Concrete <input type="checkbox"/> Steel	R Value Roof
Max. Occ. Load	R Value Walls
Roof Snow Load	psf
No. of Bedrooms	
Fire Sprinklers Reg.	<input type="checkbox"/> Yes <input type="checkbox"/> No Total

Make all checks payable to Oakley City

Plan Check OK by: _____

Building Inspector Signature _____

Water: Well _____ City Water: _____

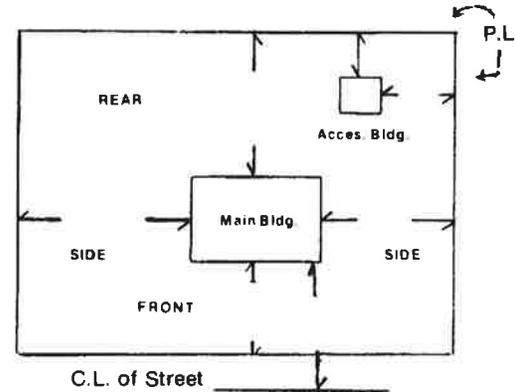
Residential 3/4" _____ 1" _____ Commercial 1 1/2" _____ 2" _____

Sewer: Septic _____ City Sewer _____

Special Requirements or Comments _____

Public Works Director _____

MINIMUM SETBACKS
 SETBACK FOR SIDE ALONG
 STREET SHALL BE SAME AS
 FRONT SETBACK.
 "WHICHEVER DISTANCE IS
 GREATER."



Zoning District _____
 Density requirement met _____
 Lot of Record/Non-Conforming _____
 Use/Structure Permitted _____
 Conditional Use:
 Required _____ Date Received _____ Not Required _____
 Special Requirements or Comments _____

NOTICE:
 Construction may require installation of underground utilities.
 Oakley City will not allow open excavation of roadways after October 1st.

This permit becomes null and void if work or construction authorized is not commenced within 180 days, or if construction or work is suspended or abandoned for a period of 180 days at any time after work is commenced. I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not the granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction and that I make this statement under penalty of perjury.

Signature of Contractor or Authorized Agent _____ Date _____

Signature of Contractor or Authorized Agent _____ Date _____

City Planner _____