

## City of Plaza

### Application for Commercial Building Permit

Application for: New Construction  Remodel  Demolition

Describe Construction: \_\_\_\_\_

#### OWNER/APPLICANT

Name:	Phone:
Address:	Physical Address:
Email:	Other Contact:

ARCHITECT	ENGINEER
Business Name:	Business Name:
Address:	Address:
Contact:	Contact:
Phone:	Phone:
Email:	Email:

#### GENERAL CONTRACTOR – PERSON DOING THE CONSTRUCTION

Business Name:	ND License #:
Mailing Addy:	Phone:
Contact Person:	Email:

#### PROPERTY INFORMATION

Street Address:	Parcel #
Current Zoning:	Sidewalk: <input type="checkbox"/> Existing <input type="checkbox"/> Install
Water: <input type="checkbox"/> Existing <input type="checkbox"/> Install	Sewer: <input type="checkbox"/> Existing <input type="checkbox"/> Install
Electric: <input type="checkbox"/> Existing <input type="checkbox"/> Install	Curb Cut: <input type="checkbox"/> Existing <input type="checkbox"/> Install
Parking: Required <input type="checkbox"/> Provided <input type="checkbox"/>	ADA Parking: Required <input type="checkbox"/> Provided <input type="checkbox"/>

#### BUILDING INFORMATION

Foundation: <input type="checkbox"/> Concrete <input type="checkbox"/> Wood <input type="checkbox"/> Insulated Concrete Forms	
Frame: <input type="checkbox"/> Steel/Metal <input type="checkbox"/> Wood <input type="checkbox"/> Other	
Exterior Walls:	Roof Material:

### COST OF CONSTRUCTION (excluding cost of land purchased)

\$ \_\_\_\_\_

**Building permit fee: Up to \$7,000 for cost of construction is \$35.00. After that it is half of one percent (.005) of the cost of construction.**

Based on the size/scope of construction, the City will determine the required supporting documents needed with this building permit. Architectural Plans shall be stamped by a ND Registered Architect. Site Plan and/or Storm Water Management Plan shall be stamped by a ND Registered Engineer.

ACKNOWLEDGEMENT: I hereby acknowledge that I have made this application and that the above information is correct. I agree to comply with all City Ordinances and State Laws regulating building construction. I understand it is my responsibility to contact the State for electrical and plumbing inspections. It is also my responsibility to contact the "811" number to locate utilities before digging.

Signature: \_\_\_\_\_ Dated: \_\_\_\_\_

Your building permit is good for one year from the date below

<b>CITY USE ONLY</b>	
____ Architectural Plans    ____ Site Plan	____ Recorded Plat    ____ SWMP
Approved by Council	Date:
Denied:	Date:
Permit Number:	Fee Paid: \$
Check # _____ or Cash _____	By:

City Official Signature: \_\_\_\_\_

Date: \_\_\_\_\_

