

APPLICATION FOR BUILDING PERMIT CITY OF CASEY, IOWA

Permit # _____
Expiration Date: _____

****Lot lines need to be marked and the proposed location of the new construction needs to be marked before a building permit can be issued.****

Applicant _____	Date _____
Address _____	Phone _____
Legal Description of Property _____	
Zoning Classification _____	Lot Size _____

Type of Improvement

Commercial _____ Residential _____

_____ 2000 sq. ft. or under _____ larger than 2000 sq. ft.

_____ Garage _____ Addition _____ Storage Shed _____ Fence _____ Sign _____ Deck

_____ Other - Describe improvement (example Driveway, Concrete pad, Sidewalk, etc.) _____

Cost of Improvement _____	Square footage _____
Front Yard Setback Required _____	Proposed _____
Side Yard Setback Required _____	Proposed _____
Back Yard Setback Required _____	Proposed _____

Beginning Construction Date _____ Estimated Completion Date _____

Will electrical work be required? _____ If so, be sure to hire a State of Iowa licensed electrician.

NOTE: A COPY OF THIS PERMIT SHALL BE PROVIDED TO THE SOUTHWEST IOWA ELECTRICAL INSPECTOR – IOWAELECTRICAL.GOV – STEVE NISSER – 515-210-7294

Off Street Parking _____

Are there utility easements on property _____ If so, my signature below indicates I understand that there can be no obstruction or building on an easement. I also understand that I cannot plant any trees, bushes, etc. on the utility easements.

Other information that may be considered helpful _____

Building materials and any debris from construction must be covered or secured to keep from blowing and littering neighboring properties.

A SITE PLAN SHOWING THE LOCATION AND DIMENSIONS OF THE PROPOSED DEVELOPMENT SHALL ACCOMPANY THE APPLICATION. THE APPLICANT CERTIFIES THAT THE ABOVE INFORMATION IS TRUE AND ACCURATE AND THAT THE ABOVE CONSTRUCTION WILL COMPLY WITH THE ZONING ORDINANCE IN ALL RESPECTS. ALL APPLICATIONS FOR BUILDING PERMITS SHALL BE SUBMITTED TO THE CITY COUNCIL FOR APPROVAL. IF APPROVED, THE PERMIT SHALL EXPIRE 1 YEAR FROM THE DATE OF ISSUANCE.

I state that I have read the step by step procedures for building permits and understand same.

Signature of Applicant

Contractor _____	Address/Contact Information for Contractor _____
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Is sewer required _____ yes _____ no _____ n/a Is water required _____ yes _____ no _____ n/a

Comments _____

Superintendent Public Works

_____ Mayor	_____ City Clerk
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For Office Use Only		Date Approved _____
Approved _____	Denied _____	Reason For Denial _____
Permit Fee _____	Date Paid _____	Type of Payment: CHECK CASH OTHER

