



# Building Permit Application

**PLEASE COMPLETE EVERYTHING IN RED**

Permit # \_\_\_\_\_

Date Issued \_\_\_\_\_

Receipt # \_\_\_\_\_

**Property Address** \_\_\_\_\_ **Date of Application** \_\_\_\_\_

Lot Number: \_\_\_\_\_

Subdivision: \_\_\_\_\_

Zoning: \_\_\_\_\_

Building Height: \_\_\_\_\_

Building Square Foot: \_\_\_\_\_

Project Start Date: \_\_\_\_\_

Describe Work Performed: \_\_\_\_\_

Valuation (cost of project & labor): \_\_\_\_\_

Owner's Name \_\_\_\_\_

Address \_\_\_\_\_

City, State & Zip \_\_\_\_\_

Daytime Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Building plans and specs are to be included with completed permit.

It is the responsibility of the permittee to call for all inspections with 48-hour notice and be on site for inspection.

Note: Electrical, plumbing, heating, air conditioning, and boiler work shall be done under separate permits which must be obtained before such work is started. Violations of the Municipal Code are punishable by \$750.00 fine.

Additional Permits Required:

- Electrical (State of Iowa)
- Plumbing
- Mechanical
- Other: \_\_\_\_\_

Contractor's Name \_\_\_\_\_

License # \_\_\_\_\_

Address \_\_\_\_\_

City, State & Zip \_\_\_\_\_

Phone # \_\_\_\_\_

Email \_\_\_\_\_

I Hereby Acknowledge that I have read this application and state that all information listed is correct and agree to comply with all City ordinances and state laws.

Please Print \_\_\_\_\_

Applicant Signature \_\_\_\_\_

Owner       Contractor

(Void 120 days from date of issue)

**OFFICIAL USE ONLY**

Foundation \$ _____	Deck \$ _____	Building \$ _____
Renovation \$ _____	Fence \$ _____	Porch \$ _____
Addition \$ _____	Pool \$ _____	Plan Review \$ _____
Accessory Building \$ _____	Solar \$ _____	Other \$ _____
<b>Final Total \$ _____</b>		

City of Chariton Building Department  
 115 South Main Street  
 Chariton, Iowa 50049  
 (641) 774-5991  
 codeofficer@chariton.org

Denied

Approved

\_\_\_\_\_  
 Building Official

\_\_\_\_\_  
 Date

Revised January 2024