

Etohe City
Planning/Inspection Department
Building Permit Application

NOTE: Permit applications **must be filled out in its entirety** to be processed. Unfinished permit applications will be returned to the applicant.

Location of Building: Address _____

Lot # _____ Subdivision _____

Lot Area _____ Lot Frontage _____

Tax ID: Map _____ Group _____ Parcel _____ Zoning _____

Owner: Name: _____

Address _____

Phone Number (include Area Code): _____

Architect or Engineer(where required)

Name _____

Phone Number (include Area Code): _____

Contractor: Name _____ License Number _____

Monetary Limit _____ Class _____ License Expires _____

Address _____ Phone _____

Type of Improvement: ___ New ___ Addition ___ Alteration ___ Other

___ On Sewer ___ On Septic System ___ Other

Proposed Use: ___ Residential(units) ___ Commercial ___ Industrial
___ Other() Number of Stories _____

Type of Construction _____ Occupancy Group _____

Principal Type of Frame:

___ Masonry ___ Wood ___ Structural Steel ___ Reinforced Concrete ___ Other ()

Square Foot of Project _____ Cost of Construction _____

Permit Fee _____

Signature of Applicant