

NORTH LOGAN CITY, UTAH

APPLICATION FOR, AND BUILDING PERMIT

NO.

Date Submitted _____

Owner _____

Mail Address _____

City _____ State _____

Zip Code _____ Phone _____

BLDG CONTRACTOR	Name _____
	Address _____
	City _____ Phone _____
	Email _____
	Lic. No. _____

PLUMBER	Name _____
	Phone _____
	Lic. No. _____

ELECTRICIAN	Name _____
	Phone _____
	Lic. No. _____

MECHANICAL	Name _____
	Phone _____
	Lic. No. _____

Site Foreman Cell# _____

Email _____

Bldg Use _____

Property Serial # _____

I/we the undersigned, acting as owner or as the duly appointed representative, understand and agree to the following: 1) all construction will comply with adopted codes & as permitted herein and be in compliance with adopted zoning ordinances; 2) all construction activities will conform to requirements of the storm water program administered by the State of Utah Division of Water Quality; 3) I/we are familiar with the present services at the building site and are responsible for any charges including but not limited to utility service, road maintenance, snow removal, etc., which charge may be caused by this construction; 4) accept full responsibility and liability for the structure/work authorized hereon and relieve North Logan City or its agents of any expressed or implied liability. Furthermore, should we relinquish ownership, we agree to inform any future purchaser(s) of these conditions and notify them of their obligation to do the same in the event that they should sell.

Date _____

Signature _____

By _____

TO SCHEDULE AN INSPECTIONS 24 HOUR NOTICE REQUIRED

Call 752-1310 EXT. 20

Information concerning required inspections is available online at [northlogancity.org/BuildingDept/Frequently Asked Questions.html](http://northlogancity.org/BuildingDept/Frequently%20Asked%20Questions.html)

FOR DEPARTMENT USE ONLY

Building Address _____

Subdivision _____

Lot _____

Zone _____

New		Addition	
Alteration		Move	

Use of Bldg _____

of Stories _____

Sq. Footage _____

Height _____ No. of Families _____

SPECIFICATIONS

Occupancy Group _____

Division _____

Type of Construction _____

Utility Stubs Provided _____

Water Sewer Yes No

Yes No

SPECIAL INFORMATION OR RESTRICTIONS

Permit Total _____

Deposit _____ Date Paid _____

Bal Due _____ Date Paid _____

Bldg.	Area	Valuation
Main		
Upper		
Basement		
Deck/Patio		
Garage		
Sub-Total		

FEES		
Building		
Electrical		
Mechanical		
Plumbing		
Sub-Total		
1% State		
Plan Check Fee		
Park Impact Fee		
Street Impact Fee		
Construction Activity		
Water Meter		
Water Imp.		
Sewer Imp		
Other Fee		
Total Fees		

Approved: _____

DATE

By: _____

BUILDING DEPARTMENT

Approved: _____

DATE

By: _____

PLANNING DEPARTMENT

Approved: _____

DATE

By: _____

UTILITIES DEPARTMENT

NOTE: WORK MUST COMMENCE WITHIN 180 DAYS AND CONTINUE WITHOUT INTERRUPTION

Decisions relative to this application are subject to review by the chief executive officer of the municipal or county entity issuing the single-family residential building permit and appeal under the International Residential Code as adopted by the Legislature.