

Floodplain yes no

Substantial Improvement yes no

Base Flood Elevation: _____

Type of work to be done: New Alteration Repair Addition

Utilities: Public Private Community

Brief description of work: _____

Estimated Total Value of Construction including materials and labor \$ _____

1st floor SF: _____ 2nd floor SF: _____ 3rd Floor SF: _____ # Bedrooms: _____

Finished Basement SF: _____ Unfinished Basement SF: _____ # Bathroom(s): _____

Carport SF: _____ Porch SF: _____ Deck SF: _____ Shed SF: _____

Attached Garage SF: _____ Detached Garage SF: _____ Basement Garage SF: _____

Above Ground Swimming pool SF: _____ Under Ground Swimming Pool SF: _____

Chimney# _____ Masonry Prefab Fireplace# _____ Masonry Prefab

Single Item Permit

Signs: #Ground Mounted _____ #Wall Mounted _____ #Light Pole Bases _____

Applicants Name: _____ Applicants Signature: _____

Phone number: _____ Email: _____

Address: _____ Date: _____

Accepted By: _____ Fees: _____

Approved By: _____ State Levy _____

Total Fees: _____