

Building Permit Application Instructions Finishing Basement

Building Permit Application Form

- Please fill in all items in the left column completely & legibly.
- You **MUST** provide accurate information on each contractor; include address, phone number, and State License Number. Please make sure the information you submit is current and correct.

Supplemental Documents

- Plan Check Fee Deposit \$47 (additional fees upon approval)
- Two Sets of Floor Plans
- Two Sets of Original Stamped & Signed Engineered Plans*
- Structural Calculations*

*Only required if adding or removing any existing walls.

Please Notify the City

- If there is a change in contractor
- If you are having difficulty submitting additional information that has been requested by the city
- If you choose not to proceed with your application

**IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT
Elyse at 801-479-3177 or egreiner@southwebercity.com**

Cash, Check, or Money Order Only



BUILDING PERMIT APPLICATION

BECOMES A PERMIT WHEN APPROVED & SIGNED

COMPLETE ALL ITEMS IN THIS COLUMN (where applicable)		OFFICE USE	Date Issued	Permit No.
Date of Application	Projected Start Date	Receipt No.		
Property Address		Parcel No.	Zone	
Lot #	Subdivision	Minimum Setbacks Front Side Side Rear		
Proposed Use of Structure		Proof of Secondary Water		
Type of Construction <input type="checkbox"/> Sign <input type="checkbox"/> Build <input type="checkbox"/> Remodel <input type="checkbox"/> Addition or Improvement <input type="checkbox"/> Repair <input type="checkbox"/> Move <input type="checkbox"/> Convert Use <input type="checkbox"/> Demolish		VALUATION \$		
Total Property Area – acres or sq. ft.		FEES		
Previous Use of Land or Structure (past 3 years)		Building Permit Fee		
Property Owner		Plan Check Deposit (due upon submission of app.)		
Phone:		Plan Check Balance		
Mobile:		Parks		
Mailing Address	City	Zip	Water	
Name of Applicant or Applicant Company (<input type="checkbox"/> check here if same as Property Owner)		Sewer		
Contact Name		Storm Sewer		
Phone:		Road		
Mobile:		State Fee		
Address	City	Zip	Public Safety Bldg.	
General Contractor		Recreation Impact		
State Lic #		Completion Bond (refundable upon final inspection)		
Address		Central Weber Sewer		
City		Total Fees		
Zip		\$		
Phone:	Mobile:	Completion Bond Release – Date:		
Electrical Contractor		SCW Ck #:		
State Lic #		NOTES/COMMENTS:		
Address				
City				
Zip				
Phone:	Mobile:			
Plumbing Contractor		REVIEW/APPROVAL:		
State Lic #		Deputy Recorder		
Address		Date		
City		Building Official		
Zip		Date		
Phone:	Mobile:	Fire Chief (where applicable)		
Surety Name (<input type="checkbox"/> check here if none)		Date		
Phone		APPLICATION IS NOT VALID PERMIT UNTIL APPROVED & SIGNED		
Address		This permit becomes null and void if work or construction authorized is not		
City		commenced within 180 days, or if construction or work is suspended or abandoned		
Zip		for a period of 180 days at any time after work is commenced. All provisions of		
Sq Ft - Main/Upper Floors: _____ Sq Ft - Garage: _____		laws and ordinances governing this type of work will be complied with whether		
Sq Ft - Basement: <input type="checkbox"/> Unfinished <input type="checkbox"/> Finished (check one)		specified herein or not. The granting of a permit does not presume to give authority		
No. of Offstreet Parking Spaces - Covered: _____ Uncovered: _____		to violate or cancel the provisions of any other state or local law regulating		
If Corner Lot – which side fronts street? (check one) <input type="checkbox"/> North <input type="checkbox"/> East <input type="checkbox"/> West <input type="checkbox"/> South		construction or the performance of construction.		
Secondary Water Provider (check one)		If any person takes occupancy prior to receiving "Certificate of		
<input type="checkbox"/> South Weber Water Improvement District (certificate required with application)		Occupancy" from South Weber City, the Completion Bond will be		
<input type="checkbox"/> Davis and Weber Counties Canal Company (certificate required with application)		forfeited and a penalty of \$50 per day will be assessed.		
<input type="checkbox"/> Weber Basin Conservancy District		Census Tract: 1251.01		
<input type="checkbox"/> Other (specify)		Traffic Zone:		
I hereby certify that the information contained in this application is true and correct.		Cert of Occupancy (temp)		
Applicant Signature _____ Date _____		Expires:		
		Cert of Occupancy (perm)		



DEPARTMENT OF COMMERCE
Division of Occupational
& Professional Licensing
160 E 300 S, Fourth Floor
P O Box 146741
Salt Lake City UT 84114-6741
(801) 530-6628

OWNER/BUILDER CERTIFICATION
and
AGREEMENT TO COMPLY WITH
THE CONSTRUCTION TRADES
LICENSING ACT

Fax a copy of this Form and Permit to (801) 530-6301 attn: Jody

Name of Owner/Builder: _____

Address: _____

City, State, Zip: _____

LOCATION OF CONSTRUCTION SITE

Address: _____

City, State, Zip: _____

Subdivision Name: _____ Lot # _____

CERTIFICATION

I, _____, certify under penalty of perjury that the following statements are true and correct and are based upon my understanding of the Utah Construction Trades Licensing Act:

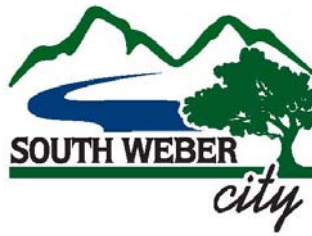
1. I am the sole owner of the property and construction project at the above described location; the project described is the only residential structure I have built this year; I have not built more than three residential structures in the past five years.
2. The improvements being placed on the property are intended to be used and will be used for my personal, non-commercial, non-public use.
3. I understand that work performed on the project must be performed by the following:
 - a. myself as the sole property owner; or
 - b. a licensed contractor; or
 - c. my employee(s) for whom I have worker's compensation insurance coverage, for whom I withhold and pay all required payroll taxes, and with respect to whom I comply with all other applicable employee/employer laws; or
 - d. any other person working under my supervision as owner/builder to whom no compensation or only token compensation is paid; and
4. I understand that if I retain the services of an unlicensed contractor or compensate an unlicensed person, other than token compensation, or other than as an employee for wages, to perform construction services for which licensure is required, I may be guilty of a Class A Misdemeanor and may be additionally subject to an Administrative fine in the maximum of \$2,000 for each day I violate the law.

Dated this _____ Day of _____ 20__

Signature of Owner/Builder

Subscribed and sworn before me this ____ day of _____ 20__, in the county of _____ State of Utah.

Notary Public



DESIGN CRITERIA*

In accordance with the International Building Code (IBC)

Design Type	Criteria
Snow Load (Ground)	57 PSF
Snow Load (Roof Minimum)	40 PSF + Drifting
Wind	120 mph
<u>Wind Exposure Category</u> East of 1900 East and North of 7800 South All Other Areas	C B
<u>Seismic</u> International Building Code International Residential Code	D D2
<u>Climate</u> Winter Temperature Frost Depth	6° F 30 inches
<u>Subject to Damage From</u> Weathering Termite Decay Flood Hazard	Severe Slight None to Slight See City Maps

***Please ensure that the calculations you submit comply with these standards. Any application received with incorrect calculations will be denied until the corrections have been made.**