

Building Permit Application



BUILDING ADDRESS	DATE OF APPLICATION	DATE ISSUED	PERMIT NUMBER
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Lot Number
Subdivision
Zoning
Building Height
Type of Construction

PLEASE PROVIDE A DESCRIPTION OF THE WORK:

Valuation: _____

Building Square Feet: _____

I HEREBY ACKNOWLEDGE THAT I READ THIS APPLICATION AND STATE THAT ALL INFORMATION LISTED IS CORRECT AND AGREE TO COMPLY WITH ALL CITY ORDINANCES AND STATE LAWS REGULATING BUILDING CONSTRUCTION.*

OWNER	Name
	Address
	Daytime Phone _____ Cell Phone _____

Please Print _____

Applicant Signature _____

Owner Contractor

*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 a \$750.00 fine.

CONTRACTOR	Name
	Address
	Office Phone _____ Cell Phone _____

Additional Permits Required

Electrical Mechanical

Plumbing Other

OFFICE USE ONLY BELOW

	Square Feet	Valuation
Unfinished BSMT	_____	\$ _____
Finished BSMT	_____	\$ _____
Structure 1st	_____	\$ _____
2nd	_____	\$ _____
Garage	_____	\$ _____
Deck	_____	\$ _____
Covered Deck	_____	\$ _____
Other	_____	\$ _____
Total	_____	\$ _____

	Permit Fees
Building	_____
Plan Review	_____
Sidewalk	_____
Approach	_____
Deck	_____
Fireplace	_____
Sewer Connection	_____
Demo	_____
Fence	_____
Pool	_____
Accessory Building	_____
Other	_____
Final Total	_____

City of Osceola Building Department
 115 N Fillmore St.
 Osceola, IA 50213
 Phone (641)- 414-9342
www.oscbuilding@iowatelecom.net

(VOID 180 DAYS FROM DATE OF ISSUE)

Denied

Approved

 Building Official Date