

### CURRY COUNTY DEPARTMENT OF COMMUNITY DEVELOPMENT

## PLANNING CLEARANCE APPLICATION REQUIREMENTS

The Planning Department must approve most construction projects prior to issuance of any Building, Sanitation, or Erosion permits. Before submitting your applications, please check with the planning department at 541-247-3284 for zoning/land-uses.

1. PLOT PLAN – Please draw the plot plan to a suitable scale on an 81/2 by 11 sheet of paper. Include the items listed below:

Existing and proposed structures and driveways

Measured distance between structures and property lines

Property lines and all easements

Existing & proposed wells, springs, streams and rivers

Existing and proposed septic systems – include tank, drain-field and repair areas

Any distinctive topographic features including existing or proposed cuts & fill

Existing and proposed adjacent roads and highways

Note: Failure to provide an accurate plot plan may result in a delay of your proposed project

### 2. Mandatory Erosion Control Application:

The mandatory erosion control application form is required and must be completed, signed and dated, even if all answers are no.

If you have any questions when filling out the planning clearance form, please call Shellie Creighton at 541.247.3226.

PC#:

FORTHCOMING ZONING:

IN DRAWER

ATTACHED

PLANS:

# PLANNING CLEARANCE FORM Planning/Building Curry County Community Development

| 94235 Moore Street, Suite 113 Gold Beach, OR 97444   | 1 60  |  |
|--|---|--|
| Phone 541-247-3304 Fax 541-247-4579  | SIC   |  |
| COMMUNITY  | 3C.   |  |
| Applicant: read and complete items 1-8.  | Th<br>Is a  |  |
| 1. PLANNING CLEARANCE FOR: (check applicable items) Sewage Disposal Permit/Authorization Notice  | 4.  |  |
|  | As  |  |
| Manufactured Home Permit Year Bedrooms Width of Manf. Home at base feet  | Ac  |  |
| Pre-Fab New  | +_  |  |
| Building Permit COMM SFD #Bedrooms Type and Size:  | 5.  |  |
| Letter of approval signed by Deputy State Fire Marshal (Required for Commercial)   | Pro   |  |
| CONTRACTOR INFORMATION   | Ma  |  |
| Owner Built  | Cit   |  |
| Contractor Name: Reg. #:   |   |  |
| Manf. Home Installer:Reg#  | 6.<br>Doe   |  |
| \$212.00 ADDITIONAL FEE FOR NEW RURAL ADDRESS New Rural Address — Address # Replacement Plate - \$36.00  |   |  |
|  |   |  |
| 2. EXISTING DEVELOPMENT:   | befo  |  |
| 2. EXISTING DEVELOPMENT:  Dwellings (stick built) how many?  | 7. An a this  |  |
|  | 7. An a this and  |  |
| Dwellings (stick built) how many?  | 7. An a this and  |  |
| Dwellings (stick built) how many?  Mobile Homes how many?  Other Buildings how many? :   | 7. An a this and 8. By r to ap I als  |  |
| Dwellings (stick built) how many? how many? how many? how many?   Other Buildings how many?   3. WATER SOURCE:   | 7. An a this and 8. By r to an I als gran   |  |
| Dwellings (stick built) how many?  Mobile Homes how many?  Other Buildings how many?  :  3. WATER SOURCE:  Well Spring Other: If on Well / Spring:   | 7. An a this and 8. By r to an I als gran ente  |  |
| Dwellings (stick built) how many?  Mobile Homes how many?  Other Buildings how many?  3. WATER SOURCE:  Well Spring Other:  If on Well / Spring:  Attach Well Log or Water Right documentation.  If in a Water District:   | 7. An a this and 8. By r to an I als gran ente Nam Sign   |  |
| Dwellings (stick built) how many?  Mobile Homes how many?  Other Buildings how many?  :  3. WATER SOURCE:  Well Spring Other:  If on Well / Spring:  • Attach Well Log or Water Right documentation.   | 8.  By r to an I to als gran ente Nam Sigr  |  |
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| Dwellings (stick built) how many?  Mobile Homes how many?  Other Buildings how many?  3. WATER SOURCE:  Well Spring Other:  If on Well / Spring:  • Attach Well Log or Water Right documentation.  If in a Water District:  • Verification (from an authorized district representative) is required prior to submission of this clearance form.  SIGNATURE OF WATER DISTRICT REPRESENTATIVE  | 8. By r to an I als gran enter Nam Sigr Mai City Date Not deve  |  |
| Dwellings (stick built) how many?  Mobile Homes how many?  Other Buildings how many?  3. WATER SOURCE:  Well Spring Other:  If on Well / Spring:  • Attach Well Log or Water Right documentation.  If in a Water District:  • Verification (from an authorized district representative) is required prior to submission of this clearance form.  SIGNATURE OF WATER DISTRICT REPRESENTATIVE  Farmland Special Assessment                           | 8.  By r to an I als gran ente Nam  Sigr  Mai  City  Date Note deve this it is Plan                             |  |
| Dwellings (stick built) how many?  Mobile Homes how many?  Other Buildings how many?  3. WATER SOURCE:  Well Spring Other:  If on Well / Spring:  Attach Well Log or Water Right documentation.  If in a Water District:  Verification (from an authorized district representative) is required prior to submission of this clearance form.  SIGNATURE OF WATER DISTRICT REPRESENTATIVE  Farmland Special Assessment  Signature of County Assessor | ager befo 7. An a this and 8. By r to ap I als gran ente Nam Sign Mail City Date Note deve this it is Plan need |  |

| 3A. SANITARY DISTRICTS:   |  |  |  |
|---|--|--|--|
| SIGNATURE OF WEDDERBURN, HARBOR, PORT ORFORD or GOLD BEACH SANITARY REPRESENTATIVE.   |  |  |  |
| SIGNATURE OF CITY OF BROOKINGS  |  |  |  |
| 3C. COOS-CURRY / BANDON ELECTRIC COORDINATION This form must be signed off and turned in when the Permit Is applied for. See Attachment   |  |  |  |
| 4. PROPERTY DESCRIPTION:  |  |  |  |
| Assessor Map #Tax Lot#  |  |  |  |
| AcreageStreet address or location:  |  |  |  |
| 5. PROPERTY OWNER INFORMATION:  |  |  |  |
| · ·   |  |  |  |
| Property Owner:   |  |  |  |
| Mailing Address:  |  |  |  |
| CityStZipPhone#   |  |  |  |
|   |  |  |  |
| 6. ACCESS:  |  |  |  |
| Does property access a county or state road?    Yes    No   |  |  |  |
| If YES, do you have an access permit? Yes No  |  |  |  |
| State or County permit #  |  |  |  |
| If NO, an access permit from the county or state (contact appropriate agency depending on whether it is a state or county road) will be required before this form can be processed. County Rd. Dept. 541-247-7097   |  |  |  |
| 7. PLOT PLAN/EROSION CONTROL PLAN  An accurate plot plan and Erosion control plan is required for processing of this permit clearance. Please draw an accurate plot plan on the reverse side, and fill out and sign the enclosed erosion control plan.  |  |  |  |
| 8. APPLICANT SIGNATURE:   |  |  |  |
| By my signature, I certify that I am the owner, or have the owner's consent to apply for a permit on the above referenced property and by my signature I also certify that the information provided by me is correct and hereby grant the staff of the Curry County Dept of Public Services permission to enter this property for purposes of this application.                 |  |  |  |
| Name  |  |  |  |
| Signature   |  |  |  |
| Mailing address   |  |  |  |
| CitySTZIPPH   |  |  |  |
| Date:   |  |  |  |
| Note: This form is intended for county staff use in processing development permits and does NOT constitute a permit. Approval of this form authorizes only WHAT is applied for under NO. 1 at the time it is filed. Building plans <u>MUST</u> be turned in within one year of the Planning Department's approval, or Planning Clearance and fees will need to be re-submitted. |  |  |  |
|   |  |  |  |

## PLANNING STANDARDS AND REQUIREMENTS

| Land  | Use Zone:   | Special Requirements or Considerations:                                   |  |  |
|-------|---|---|--|--|
| D     | Y. Cathaolm   | 100 year flood plain<br>FIRM or Floodway Panel#                           |  |  |
|       | erty Line Setbacks:   | Geologic Hazard as identified on DOGAMI maps                              |  |  |
| Q     | Harbor Bench Farm District Setback FRONT:   | Wetland or potential wetland as identified by                             |  |  |
| Q)    | 35 feet from the center of all roads OR 10 feet from  | Wetland Inventory Maps: Map#Scenic Waterway                               |  |  |
|       | any property line adjacent to a roadwhich ever is   | USFS approval ODPR approval   |  |  |
|       | greater   | Historic structure/cultural site/historic-archeological                   |  |  |
| Q.    | Vision clearance  | pverlay   |  |  |
| _     |   |   |  |  |
|       | No requirement SIDE:  | CONDITIONS OF APPROVAL:   |  |  |
| ū     | 5 feet from property line for structures 15' and under For structures exceeding 15'add 6 inches (½ foot) for every foot over 15' height TOTAL SETBACK |   |  |  |
| Q     | No requirement BACK:  |   |  |  |
| Q     | 5 feet from property line for structures 15' and under  |   |  |  |
| _     | For structures exceeding 15'add 6 inches (½ foot) for   |   |  |  |
| -     | every foot over 15" height TOTAL SETBACK  | The above proposal has been reviewed and found compatible                 |  |  |
|       | No requirement  NOTE: Eaves, gutters, sunshades, and other similar  | with the applicable LCDC Acknowledged Plan; provided the                  |  |  |
|       | architectural features may not project into required  | above referenced standards are maintained at the time of                  |  |  |
|       | setbacks more than two (2) feet   | construction  |  |  |
| Off S | treet Parking:  | County Planning Staff Reviewer:   |  |  |
|       |   | County Training Start Reviewer.   |  |  |
| ш.    | # of 9' x 18' parking spaces required   |   |  |  |
|       | parking lot plan required   | Signature   |  |  |
| Struc | ture Height:  | Title Date  |  |  |
|       | 35' maximum 45' maximum   |   |  |  |
|       | Airport Overlay Zone requiresfeet   | City Planning Staff Reviewer (if required): Outside Urban Growth Boundary |  |  |
|       |   | Inside Urban Growth Boundary, outside city limits                         |  |  |
| _     | No requirement  |   |  |  |
| Lot C | Origin and Previous Land Use Action:  | Inside city limits  |  |  |
|       | Pre-existing  | Signature   |  |  |
|       | ous Land Use Actions:   |   |  |  |
|       |   | Title Date  |  |  |
|       |   | tine Dine   |  |  |
|       | D REMOVAL OR DISTURBANCE of Riparian tation within:   | Sanitarian Reviewer:  |  |  |
| vege  |   | Permit # Authorization Notice#  |  |  |
|       | 50 feet OR 🗖 75 feet  |   |  |  |
| of an | y streams, rivers, or lakes per county Riparian Buffer  | System approved System denied   |  |  |
| Over  | lay Zone requirements   | Comments:   |  |  |
| Fire  | Break:  |   |  |  |
|       | A firebreak of feet must be maintained  |   |  |  |
|       | round all proposed structures   |   |  |  |
|       | , -   | Signature   |  |  |
| ū     | No requirement  |   |  |  |
|       |   | Title Date  |  |  |

U:\Assessment\internal share\permit\_clearance\_app 07/01/2014

## **MANDATORY EROSION CONTROL APPLICATION**

FAILURE TO PROVIDE THE REQUESTED INFORMATION WITH YOUR PLANNING CLEARANCE APPLICATION WILL DELAY THE REVIEW OF YOUR APPLICATION.

### **EPSC SITE PLAN REQUIREMENTS**

- · All property lines and adjacent roadways
- Location of all existing and proposed buildings
- · Location of proposed or existing on-site septic areas
- Location of all natural and artificial water features (rivers, streams, drainage, wetlands, etc)
- Location of access road or driveway
- Location and area of site disturbance associated with your project
- Direction of slopes on site; sectors within the area of land disturbance shall be labeled in ranges:

Less than 15% slope 15% to 20% slope

20% or greater slope (SEE EXAMPLE BELOW FOR ASSISTANCE)

- Existing (pre-development) drainage pattern
- Location of proposed erosion control measures:

Access points: (construction entrance, existing paved driveway or access protected with alternative measures such as wood chips, plywood, etc)

Perimeter containment measures: (sediment fence, compost filter berm, existing structures, etc)

Inlet protection if located in an area with storm drainage system Riparian protection

- Stockpile or staging areas of disturbed material
- North arrow
- Scale (1" = X') of site plan—please use even scale numbers such as: 10', 20' 50' or 100' use engineering scale NOT architectural

FAILURE TO PROVIDE THE REQUESTED INFORMATION WITH YOUR PLANNING CLEARANCE APPLICATION WILL DELAY THE REVIEW THE APPLICATION.

# Visual Examples of Slope

Numbers are approximate

5% - 20:1 - 3°

**½**15% - 7:1 - 8°

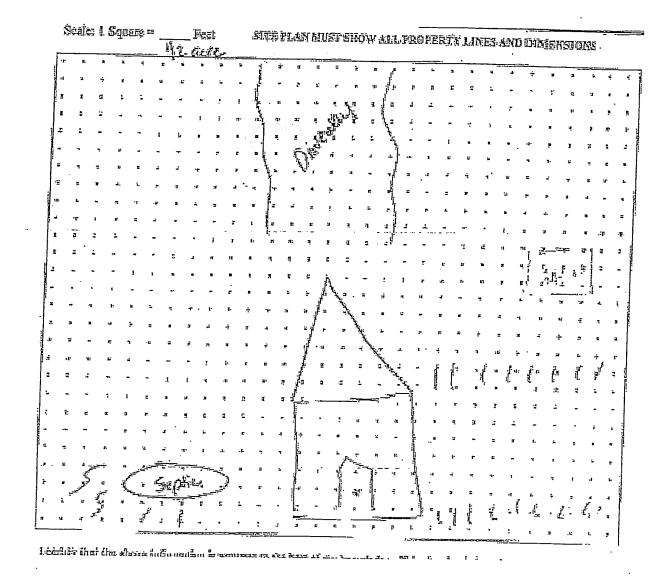
**Å**30% - 3.3:1 - 17°

If you have questions regarding completing this form correctly, please contact the Curry County Planning Department at 541-247-3304.

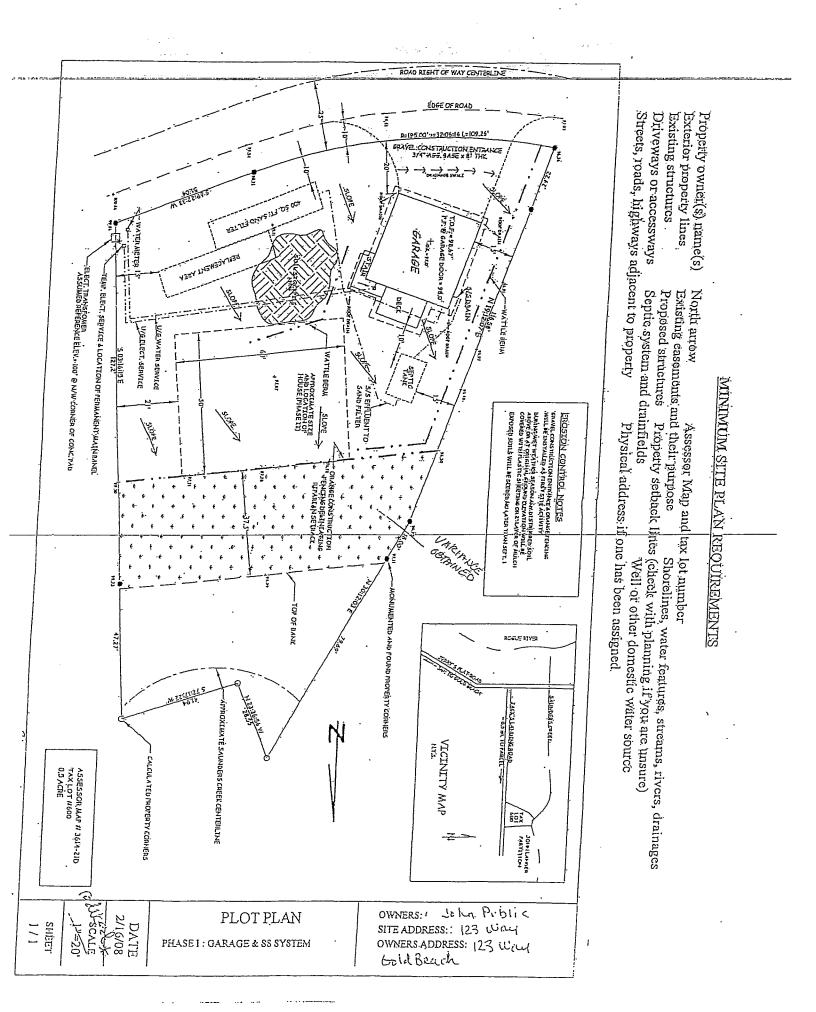
# EROSION PREVENTION AND SEDIMENT CONTROL (EPSC) PLAN REVIEW APPLICATION

| PR  | OPERTY OWNER INFO: NAME:   | PHONE:  |  |
|---|--|---|--|
|   | RESPONSIBLE PARTY FOR INSTALLATION & MAINTENANCE OF EROSION CONTROL MEASURES:  |   |  |
| NAI   | ME:  | PHONE:  |  |
| ADI   | ADDRESS: ACREAGE:  |   |  |
| CIT   | Y/STATE/ZIP:   |   |  |
| PR  | OPERTY DESCRIPTION: ASSESSOR MAP/TAX   | LOT:  |  |
| PRO   | OPOSED DEVELOPMENT:  |   |  |
|   | SFD   COMMERCIAL   MULTIFAMILY   | ☐ LAND DIVISION ☐ SITE WORK ONLY  |  |
| 1.  | WILL 800 SQUARE FEET OR MORE OF SOIL S   | SURFACE BE DISTURBED? YES \( \Boxed{1} \) NO \( \Boxed{1} \)                |  |
| (IN   | WILL 2,000 SQUARE FEET OF <b>IMPERVIOUS</b> SU<br>IMPERVIOUS MEANS WATER CAN'T GET THRO<br>NCRETE, ROOFS OR BUILDINGS—WATER TH | UGH IT TO THE GROUND—LIKE PAVEMENT,   |  |
| 3.  | WILL IMPERVIOUS SURFACES COVER MORE  | THAN 25% OF THE LOT AREA? YES 🗆 NO 🗆  |  |
| WH  | IICH IS LESS: THE 2,000 SQ FT OR THE   | 25% COVERAGE?: CIRCLE ONE   |  |
|   |  | Y OF THE 3 QUESTIONS ABOVE<br>PSC PLAN SEE BELOW:                           |  |
|   | PLEASE SUBMIT THE FOLLOWING  | GITEMS FOR EPSC PLAN REVIEW:  |  |
| 1.  | DETAILED SITE PLAN-REQUIRED ELEMENTS   | ON THE BACK OF THIS FORM  |  |
|   | BEST MANAGEMENT PRACTICES (BMP'S) TO<br>STRAW BALES, SILT FENCES, SEEDING/SODE   | BE UTILIZED TO PREVENT EROSION—SUCH AS<br>DING, GRAVELING EXPOSED AREAS ETC |  |
| 3.  | STRATEGY TO MINIMIZE THE REMOVAL OF V  | EGETATION COVER, PARTICULARY TREE COVER                                     |  |
|   |  |   |  |
| APPLICANT CERTIFICATION; I hereby affirm, under penalty for perjury, that I amt he owner or authorized representative of the owner and have full authority and responsibility to execute this erosion control application. I agree to abide by the requirements of the approved erosion control plan and/or the erosion control ordinances to the best of my ability. I am the party responsible for erecting and maintaining the erosion control best management practices (BMP) on this site until such time as the final occupancy permit is obtained or until a follow up permit is issued to another party. I understand that representatives of Curry County may enter the site to inspect the BMP's installed and that because of the uncertainty of construction practice, weather, topography and/or other conditions they may require additional practices beyond those shown on the approved plan to be installed. |  |   |  |
| Si  | ignature of Applicant:   | Date  |  |

| energia (h. 1884).<br>1886 - Arriva Aleman, energia (h. 1884).<br>1886 - Arriva Aleman, energia (h. 1884).  |  |   |  |  |   |  |
|---|--|---|--|--|---|--|
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|   |  |   |  |  |   |  |



# BAD SITE PIAN



# COOS-CURRY/BANDON ELECTRIC COORDINATION SIGN-OFF FORM

This form must be taken to Coos-Curry Electric or (Bandon Electric when applicable) with the Plot Plan that must be turned in when applying for a building permit. Please discuss your proposed development with the utility company to ensure electrical safety and get the signature of the Electric Representative. Return the Permit Clearance and this form with your plans to Curry County Department of Community Development.

| Signature of Electric Representative |
|--------------------------------------|
|                                      |
| Signature of Permit Applicant        |

### FIRE DISTRICT SIGN OFF FORM

This form must be taken to the local Fire Department with the Plot Plan that must be turned in when applying for a building permit. Please discuss your proposed development with the Fire Department to ensure fire safety and get the signature of the Fire Department Representative. Return the Permit Clearance and this form with your plans to Curry County Department of Community Development.

| <br>Signature of Fire Department Representative |
|---|
| Signature of Applicant                          |

| Fire District/ Department | Contact         | Phone Number |
|---------------------------|-----------------|--------------|
| Agness Fire               | Bill Scherbarth | 541 247-7987 |
| Brookings Fire            | Jim Watson      | 541 469-1142 |
| Brookings Rural           | Jim Watson      | 541 469-1142 |
| Cape Ferrelo Fire         | Aaron Johnson   | 541 661-1499 |
| Cedar Valley Fire         | Wade Hooey      | 541 698-6237 |
| Gold Beach Fire           | Tyson Krieger   | 541 247-6204 |
| Harbor Fire               | John Brazil     | 541 469-5301 |
| Langlois Fire             | Mike Murphy     | 541 348-2304 |
|                           |                 | 541 253-6191 |
| Ophir Fire                | Adam Brotton    | 541 698-6110 |
| Pistol River Fire         | Rocky Carpenter | 541 247-2886 |
| Port Orford Fire          | David Duncan    | 541 332-3681 |
| Sixes Fire                | Wayne Moore     | 541 348-9927 |
|                           |                 | 541 253-6028 |
| Upper Chetco Fire         | Jim Watson      | 541 469-1142 |
| Wedderburn Rural          | Tyson Krieger   | 541 247-6204 |
| Winchuck Fire             | Bill Hauer      | 541 469-7048 |

# BUILDING PERMIT APPLICATION CURRY COUNTY – GOLD BEACH – PORT ORFORD

| TYPE OF WORK                         |                         |  |  |
|--------------------------------------|-------------------------|--|--|
| ☐ New construction                   | Demolition              |  |  |
| Addition/alteration/replacement      | Other:                  |  |  |
| CATEGORY OF CONSTRUCTION             |                         |  |  |
| 1- and 2-family dwelling             | ☐ Commercial/industrial |  |  |
| Accessory building                   | Multi-family            |  |  |
| Master builder                       | Other:                  |  |  |
| JOB SITE INFORM                      | ATION AND LOCATION      |  |  |
| Job site address:                    |                         |  |  |
| City/State/ZIP:                      |                         |  |  |
| Suite/bldg./apt. no.:                | Project name:           |  |  |
| Cross street/directions to job site: |                         |  |  |
|                                      |                         |  |  |
|                                      |                         |  |  |
|                                      |                         |  |  |
| Subdivision:                         | Lot no.:                |  |  |
| Tax map/parcel no.:                  |                         |  |  |
|                                      | ION OF WORK             |  |  |
|                                      |                         |  |  |
|                                      |                         |  |  |
|                                      |                         |  |  |
|                                      |                         |  |  |
| ☐ PROPERTY OWNER                     | TENANT                  |  |  |
| Name:                                | 2000                    |  |  |
| Address:                             |                         |  |  |
| City/State/ZIP:                      |                         |  |  |
| Phone: ( )                           | Fax: ( )                |  |  |
| ☐ APPLICANT                          | ☐ CONTACT PERSON        |  |  |
| Business name:                       |                         |  |  |
| Contact name:                        |                         |  |  |
| Address:                             |                         |  |  |
| City/State/ZIP:                      |                         |  |  |
| Phone: ( )                           | Fax::( )                |  |  |
| E-mail:                              |                         |  |  |
| CONT                                 | RACTOR                  |  |  |
| Business name:                       | <u> </u>                |  |  |
| Address:                             |                         |  |  |
| City/State/ZIP:                      |                         |  |  |
|                                      | Fav.(                   |  |  |
| Phone: ( )                           | Fax: ( )                |  |  |
| CCB lic.:                            |                         |  |  |
| Authorized signature:                |                         |  |  |
| Print name:                          | Date:                   |  |  |

#### DEPT. USE ONLY

| 1- AND 2-FAMIL   |  |
|--|--|
| Permit fees* are based on the value (rounded to the equipment, materials, labor, overwork indicated on this application).                    | he nearest dollar) of all erhead, and the profit for the |
| Valuation  |  |
| Number. of bedrooms:   |  |
| Number of bathrooms:   |  |
| Total number of floors:  |  |
| New dwelling area:   | square feet  |
| Garage/carport area:   | square feet  |
| Covered porch area:  | square feet  |
| Deck area:   | square feet  |
| Other structure area:  | square feet  |
| COMMERCIAL-U   | SE CHECKLIST   |
| Permit fees* are based on the vi<br>Indicate the value (rounded to t<br>equipment, materials, labor, ove<br>work indicated on this applicati | he nearest dollar) of all erhead, and the profit for the |
| Valuation  |  |
| Existing building area:  | square feet  |
| New building area:   | square feet  |
| Number of stories:   |  |
| Type of construction:  |  |
| Occupancy groups:  |  |
| Existing:  |  |
| New:   |  |
| BUILDING PERMIT FEES*  |  |
| Please refer to fee schedule   |  |
| Fees due upon application  |  |
| State surcharge (12% of permit   | fee)   |
| Amount received  |  |
| Date received:   |  |
|  |  |

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

**Curry County Department of Community Development** 

94235 Moore St. Suite 113 Gold Beach, OR 97444

Phone: 541-247-3226 Fax: 541-247-4579

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e-mail: CreightonS@co.curry.or.us



### Department of Community Development

### DECLARATION OF VALUE

The value of a building project is the total actual construction cost for all classes of work. An accurate estimate of value must include all costs for architectural, structural, electrical, plumbing, heating, and ventilation devices and equipment, and the contractor's profit – even if he or she has a financial interest in the project.

I hereby certify the estimated value of the construction project described herein to have

been prepared consistent with the above description, and declare it to be

\$\_\_\_\_\_\_\_.

I understand that the Building Division is not bound by this estimate for establishing permit fees.

Project Identification: Type of Structure\_\_\_\_\_\_\_\_

Township\_\_\_Range\_\_\_Section\_\_\_\_Tax Lot\_\_\_\_\_\_\_

Street Address\_\_\_\_\_\_\_

Owner Name\_\_\_\_\_\_

Please Check One:

Owner Builder Representative with Written Authorization