



Permit No:	_____
Property Zoned As:	_____
Permit Fee:	_____
Date Approved:	_____
Date Paid:	_____

BUILDING PERMIT APPLICATION

****YOU MUST SUPPLY A PLAN OF THE PROPOSED PROJECT DRAWN TO SCALE****

(Must submit one site plan, commercial projects must have a full construction set submitted)

(A permit will not be considered unless you outline your setbacks & property lines on the site plans you submit)

PROPERTY & OWNER INFORMATION	
Owner's Name:	Project Address:
Site Address (if different):	
Phone:	Email:
APPLICANT INFORMATION (if other than OWNER)	
() Builder	() Contractor
Applicant Name (if other than owner):	
Applicant Business Name:	
Address:	
Phone:	
DESCRIPTION OF WORK	
<input type="checkbox"/> New Home	<input type="checkbox"/> New Construction
<input type="checkbox"/> Addition	<input type="checkbox"/> Move Building on property
<input type="checkbox"/> Deck	<input type="checkbox"/> Sign
<input type="checkbox"/> Fence	<input type="checkbox"/>
<input type="checkbox"/> One Family	<input type="checkbox"/> Garage-Attached
<input type="checkbox"/> Two Family	<input type="checkbox"/> Garage-Separate
<input type="checkbox"/> Multi-Family	<input type="checkbox"/> Other (specify)
<input type="checkbox"/> Commercial	<input type="checkbox"/> Other (specify)
PROJECT SIZE/DIMENSIONS	
Please complete all that are applicable:	
RESIDENTIAL DWELLINGS	MULTI-FAMILY/COMMERICAL/INDUSTRIAL
Total # of Floors:	Total Building Area:
Total Height:	Total # of Floors:
Total Structure (in Sq Ft):	Total Structure (in Sq Ft):
Finished Basement: () Yes () No	Total Height:
	Off Street Parking Provided: () Yes () No
	Number of Stalls:
ACCESSORY BUILDING	DECK/PATIO
Height (peak):	Height (wall):
Length:	() Front () Rear Yard
Width:	Length:
Total SF:	Width:
	Total SF:
FENCE	ESTIMATED COST
() Front () Rear Yard	\$
Length:	Do you need a Water Permit: <input type="checkbox"/> Yes <input type="checkbox"/> No
Width:	Do you need a Sewer Permit: <input type="checkbox"/> Yes <input type="checkbox"/> No
Height:	
Material:	
CONTROL OF STORM WATER DRAINAGE	
Your project must comply with the City of Hull "Control of Storm Water Drainage" Ordinance. Please ask for a copy of said Ordinance should your project exceed 7,001 square feet of impervious* surface area.	
*impervious = not allowing fluid to pass through (i.e. concrete, asphalt, gravel, roof, etc.)	

ACKNOWLEDGEMENT & SIGNATURE

The applicant, by signature, hereby certifies that the above information is true and accurate and that the above construction shall comply with the City of Hull Zoning Ordinance in all respects. It is also understood that any permit granted shall be null and void unless the proposed project is started within 180 days from the date I have been granted this Building Permit Application. Furthermore, I understand it is the responsibility of me to make sure all Iowa One Calls have been made on my property for any digging I will be doing. I also understand it is my responsibility to know where my property lines are located.

Signed: _____ Date: _____
Owner or Applicant (if other than Owner)

Signed: _____ Date: _____
Contractor or other Authorized Representative

PERMIT WILL BE VALID FOR ONE (1) YEAR