



WEST VALLEY CITY *Utah*

BUILDING PERMIT APPLICATION
3600 S. CONSTITUTION BLVD.
WEST VALLEY CITY, UTAH 84119
BUILDING PERMIT QUESTIONS: 801-963-3283

PLEASE PRINT CLEARLY AND COMPLETE ALL APPLICABLE AREAS:

Permit #

Date of Application:		Date Issued:	
Type of Construction:		Construction/Project Value:	
Applicant/Contact Person:			
Applicant/Contact Address:			
Phone:		Email:	
Owners Name:		Phone:	
Owners Address:			
Owner/Builder: YES <input type="checkbox"/> NO <input type="checkbox"/>		Completed Owner/Builder Form: YES <input type="checkbox"/>	
Lot#	Subdivision:		Mobile Home Park:
Commercial Project Name:			
Bldg #	Unit #		Space #
General Contractor:		State License #	
Address:		City/Zip:	
Phone:		Email:	
Electrical Contractor:		State License #	
Address:		City/Zip:	
Phone:		Email:	
Plumbing Contractor:		State License #	
Address:		City/Zip:	
Phone:		Email:	
Mechanical Contractor:		State License #	
Address:		City/Zip:	
Phone:		Email:	

This permit becomes null and void if work or construction authorized is not commenced within 180 days or if construction or work is suspended or abandoned for a period of 180 days at any time after work is commenced. I hereby certify that I have read and examined this application and know the same to be true and correct. All provision of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provision of any other state or local law regulating construction or the performance of construction and that I make this statement under penalty of perjury.

PRINT NAME

DATE

SIGNATURE

STAFF USE ONLY

Building Fee	\$			Project		SQ. FT.
Plan Review Fee	\$			Rough Basement		SQ. FT.
Subtotal	\$			Finished Basement		SQ. FT.
Plan Deposit	\$ -			Carport		SQ. FT.
Engineering Fee	\$			Garage		SQ. FT.
Fire Dept. Fee	\$			Porch		SQ. FT.
P/Z Review Fee	\$			Type of Building:	Occupancy Group:	
P/Z Impact Fee	\$			Bldg. Sq. Ft. Total:	Bldg. Sq. Ft. Floor:	
State Fee	\$			Maximum Occupant Load:	Building Height:	
Tech Fee	\$			Fire Sprinkler	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	\$			Bond Required	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Bond	\$			Posting Bond		
TOTAL	\$			Federal Tax ID#		

COMMENTS:

DEPARTMENT APPROVALS	REQUIRED	APPROVED
Fire Dept.		
Water & Sewer Improvement District		
Public Works		
Health Dept.		
Air Quality Control		
Natural Gas		

HIGH WATER TABLE: YES NO
 If YES, read the following: Due to high water table, footing elevations must be verified by contractor with transit at time of footing inspection OR leave a string stretched level from street curb to read exterior wall footings.
 MAXIMUM allowable footing depth: Below top of street curb:

OVERPRESSURE ZONE: YES NO

ZONE	ZONE APPROVED BY:	DATE:
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MINIMUM SETBACKS IN FEET				
TBC	PLINE	G.SIDE	SIDE	REAR

COMMENTS:

RESIDENTIAL BUILDING CHECKLIST

<input type="checkbox"/>	<p>2 copies of the Site Plan. Must be to scale. Please include the following:</p> <ul style="list-style-type: none">• Show lot lines, dimensions and setbacks (the distance by which a building or part of a building is set back from the property line), address, lot number & subdivision or tax ID # and the name or number of the frontage streets.• Show all structures, existing and proposed.
<input type="checkbox"/>	<ul style="list-style-type: none">• 2 sets of drawings, must be stamped and signed by an engineer. To include footing and foundations plans floor plans of each floor, electrical diagrams, elevations, framing details, and wall type diagram (as applicable).
<input type="checkbox"/>	<p>2 copies of the soils report, must be stamped and signed by a geotechnical engineer (if applicable).</p>
<input type="checkbox"/>	<p>2 structural calculations, must be stamped and signed by engineer (if applicable).</p>
<input type="checkbox"/>	<p>2 sets of ResChecks (energy code) *Please sign the back sheet.</p>
<input type="checkbox"/>	<p>2 sets of Manual J (heating and cooling load calculations).</p>
<input type="checkbox"/>	<p>2 sets of Manual D (duct schematic).</p>