

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
City Hall at 801-479-3177**

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:		State Fee		
Mobile:		Completion Bond (refundable upon final inspection)		
Mailing Address	City	Zip		
Name of Applicant or Applicant Company (<input type="checkbox"/> check here if same as Property Owner)				
Contact Name		Phone:		
Address		Mobile:		
City		Zip		
General Contractor		State Lic #		
Address		City		
City		Zip		
Phone:		Mobile:		
Electrical Contractor		State Lic #		
Address		City		
City		Zip		
Phone:		Mobile:		
Plumbing Contractor		State Lic #		
Address		City		
City		Zip		
Phone:		Mobile:		
Mechanical Contractor		State Lic #		
Address		City		
City		Zip		
Phone:		Mobile:		
Surety Name (<input type="checkbox"/> check here if none)		Phone		
Address		City		
City		Zip		
Sq Ft - Main/Upper Floors: _____		Sq Ft - Garage: _____		
Sq Ft - Basement: <input type="checkbox"/> Unfinished <input type="checkbox"/> Finished (check one)				
No. of Offstreet Parking Spaces - Covered: _____		Uncovered: _____		
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				
Secondary Water Provider (check one)		If any person takes occupancy prior to receiving "Certificate of Occupancy" from South Weber City, the Completion Bond will be forfeited and a penalty of \$50 per day will be assessed.		
<input type="checkbox"/> South Weber Water Improvement District (certificate required with application)				
<input type="checkbox"/> Davis and Weber Counties Canal Company (certificate required with application)				
<input type="checkbox"/> Weber Basin Conservancy District				
<input type="checkbox"/> Other (specify)				
I hereby certify that the information contained in this application is true and correct.		Census Tract: 1251.01		Traffic Zone:
Applicant Signature _____		Date _____		Expires:
		Cert of Occupancy (temp)		Cert of Occupancy (perm)

DEPARTMENT OF COMMERCE
Division of Occupational and
Professional Licensing
Bureau of Investigation
160 E 300 S
PO Box 146741
Salt Lake City UT 84114-6741
Email to jwoolf@utah.gov
Or Fax to 801-530-6301, Attn: Jody Woolf



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

- New Residential Construction**
 Remodel or Addition by Owner

Name of Owner/Builder: _____
Current Address: _____
City, State, Zip: _____

LOCATION OF CONSTRUCTION SITE:

Address: _____
City, State Zip: _____
Subdivision: _____ Lot No. _____

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. **For New Residential Construction Only.** 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.

For New Residential and Remodel Construction:

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 owner of the property; or
- b. a licensed contractor; or
- c. my employee(s) on whom I have Workers Compensation Insurance coverage, on 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 \$2,000.00 for each day on which I violate the Utah Construction Trades Licensing Act.

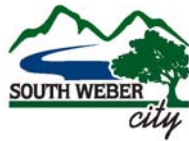
Dated this _____ day of _____ 20__

Signature of Owner/Builder

Subscribed and Sworn before me this _____ day of _____ 20__, in the County of _____ State of Utah.

My Commission Expires: _____

Notary Public



SOUTH WEBER CITY
DUST CONTROL REQUIREMENT

APPLICANT or GENERAL CONTRACTOR _____

SUBDIVISION _____ **LOT #** _____

ADDRESS _____

The builder will make every effort to prevent dust, sand and soil from blowing or becoming airborne and being carried off the site.

The following dust control procedures will be adhered to:

- ✓ Attempts will be made to leave all natural vegetation on lot.
- ✓ Heavy equipment will be utilized only when wind is down.
- ✓ Temporary secondary sprinklers will be placed around perimeter of lot and used to keep dust down as needed.

Applicant/Contractor or Owner Signature

Date