

DOUGLAS COUNTY BUILDING PERMIT APPLICATION

Each building site must have a separate Site Plan

Applicant to complete **highlighted** spaces only.

Zoning Administrator

1. Job Address				Owner	Job Address
2. Legal Description of Construction Site					
3. Owner	Mail Address	Zip	Phone		
4. Contractor	Mail Address	Zip	Phone		
5. Architect or Designer	Mail Address	Zip	Phone		
6. Type and Use of Building					
7. Class of Work (mark one)	<input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Move <input type="checkbox"/> Remove				
8. Describe Work:					
9. Valuation of Work:	\$				
10. Special Conditions:					

Application Accepted By: _____ Site Plans Checked By: _____ Approved for Issuance By: _____

NOTICE

This permit will expire if work or construction authorized has not commenced within 180 days. If work or construction is not substantially completed within two (2) years of issuance, this permit will expire.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions 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 provisions of any other state or local law regulating construction or the performance of construction.

Signature of Contractor or Authorized Agent Date

Signature of Owner (if owner builder) Date

PERMIT FEE	
Zoning District	Sewer/Water Certification of Service
Animal Waste Certification	Record #
For County Officials Use Only	
When properly validated (in this space), this is your permit.	
The above application is hereby approved.	
Building Permit Number: _____	
_____ Zoning Administrator or Authorized Representative Date	

• THIS BUILDING PERMIT IS SUBJECT TO AN APPEAL PERIOD FOR 5 DAYS AFTER PUBLICATION.