BUILDING APPLICATION/PERMIT CITY OF EARLHAM, IA 50072

Date:	Application/Permit #:
	Permit Fee:
Owner Information **********	Job Information **************
	Valuation:
	Address/Location:
Phone #:	
	Lot #(s)/Block/Addition:
Contractor Information *********	
Name:	
Address:	Zoning Type:
	Use of Structure:
Phone #:	
Materials Description:	
(A) Roofing Material	
(B) Siding Material	
	ork
(D) Foundation	
(1) Basement	
(a) Poured	[]
(b) Block	
(c) Wood	
(d) Other	[] - Describe:
(2) Crawl Space	[]
(3) Floating Slab	[]
(4) Slab with Footings	[]
(5) Other	[] - Describe:
(E) Other (fence, deck, porch,	sidewalk, etc.) - Describe:
(F) Complete the Elevation ar	nd Plat drawings on second page.
	For the enforcement of subdivision covenants. It is the
responsibility of property owners to be a	aware of and comply with covenant restrictions.
I hereby acknowledge that I have read the	nis Application and state that the above is correct and
•	s and State laws regulating building construction. Any
	ect to approval of the City of Earlham Zoning
Administrator.	
	Zoning Administrator
Owner Signature:	Signature:

ELEVATION PLAN				
Show the elevation – (front and side views).	(each square is _	feet by	feet)	
Locate present structures, if any,	Front View			
and give heights.				
Locate new structures and give heights.				
General information – Describe				
structure elevation.				
	Side View			
Orient (indicate North in circle). Locate present structures, if any, and give dimensions.	(each square is _	feet by	feet)	
Give front yard depth and side yard width. General information – Describe structure				
plat.				
piuu				