



Permit Number: _____

Town of Wheatland

Building and Life Safety Division

Application for Building Permit

Date Applied: _____

Date Approved: _____

Date Expires (180 days): _____

Applicant: _____

Applicant Type: _____

Property Owner: _____

Primary Contractor: _____

Address: _____

Email: _____

Phone: _____

Contractor: _____

Contractor: _____

Address of Proposed Construction: (if different than owner) _____

Contractor: _____

Contractor: _____

Application is hereby made to the TOWN OF WHEATLAND for a Building Permit in conformity with the requirements of the current International Building Code Ordinance of this town and any amendment thereto for the following described work:

Permit Type: _____

Construction Type: _____ Occupancy Class: _____

Proposed Building Use: _____

Legal Description of Property: _____

Property Zoned as: _____

Size of lot: _____ Sq. Ft. of Building _____ Number of Floors: _____ Plans and Specs. Attached: _____

Description of Project: _____

Number of Baths: _____ Garage Attached: _____ Basement Finished: _____

Applicant Signature: _____ Estimated Cost: _____

Office Use Only:

Planning & Zoning Requirements: _____

Board of Adjustment Requirements: _____

Agreement Required: _____

City Departments Involved: Water/Wastewater Dept: _____ Electrical Dept: _____ Street Dept: _____

FEES APPLICABLE:

Building Permit: _____

Electrical Dept.: _____

Meter Deposit: _____

Water Dept.: _____

Meter Deposit: _____

Street Dept.: _____

Other: _____

Total Fees: _____

Receipt Number: _____

Approved - Building Official

This permit has been issued under the authority of the _____ as adopted by the Town of Wheatland. Any deviation from the approved plans, addition to the scope of work represented herein, or failure to comply with all applicable WMC or ICC requirements shall be considered cause for revocation of this permit. If revocation occurs, all fees shall be considered forfeited, and a new permit with applicable fees shall be submitted for review.