

CITY OF HAWARDEN, IOWA

BUILDING, REMODELING, DISMANTLING OR MOVING PERMIT

Date _____ Permit No. _____

Applicant/Owner: _____ Builder: _____

Owner's Address: _____ Phone: _____

Project Address: _____ Phone: _____

I hereby make application for a Building Permit to _____

_____ on

Lot(s) _____, Block _____, _____ Addition to Hawarden.

Is the building located within a floodplain? Yes _____ No _____

Building Lot Dimensions _____ Building Dimensions _____

Is 40% of the lot covered by structures? Yes _____ No _____ Zoning _____

Approximate cost of said work to be done will be \$ _____

Applicant has notified Iowa One Call @ 1-800-292-8989 Yes _____ No _____

Applicant must flag or stake the proposed construction location

Applicant understands that an approval or denial will be mailed within 3 business days of the permit request.

Applicant also understands that the building permit, if approved, is valid for one year from the date of issuance.

You are hereby authorized to proceed with the building project described above in accordance with this application and any attachments thereto, filed with the City of Hawarden, Iowa. This authorization shall not be construed to permit violations of any City Ordinance or Regulation.

Attachments _____

Pages of Attachments _____

Building Official, City of Hawarden