

CITY OF WALKER, IOWA
APPLICATION FOR BUILDING PERMIT

This application shall be acted upon within 15 days of receipt by Zoning Administrator

NAME OF APPLICANT: _____

APPLICANT'S PHONE NUMBER: _____

ADDRESS OF APPLICANT: _____

ADDRESS OF BUILDING SITE: _____

LEGAL DESCRIPTION OF PROPERTY: _____

ZONING DISTRICT: (check one)

- Class A Residential District
- Class B Residential District

Is any area of the proposed building site in a flood zone? Y N

- Class A General Business (Outside Downtown Business District)
- Class B General Business (Downtown Business District)

- Class A Industrial District
- Class A Agricultural District

LOT SIZE _____

FRONT YARD DEPTH _____ SIDE YARD DEPTH _____

REAR YARD DEPTH _____ SIDE YARD DEPTH _____

(Measurements are from the building to lot line. Do not include street right of way)

SURVEY IS ATTACHED OR LOT PINS ARE PRESENT AND LOCATED

STRUCTURE: (check one)

- SINGLE FAMILY DWELLING COMMERCIAL GARAGE
- MULTIPLE FAMILY DWELLING INDUSTRIAL OTHER

CONSTRUCTION:

- NEW REMODEL ADDITION REPAIR

EXTERIOR WALL MATERIAL _____ INTERIOR WALL MATERIAL _____

FOUNDATION WALL MATERIAL _____ ROOFING MATERIAL _____

INTENDED USE OF LAND AND/OR BUILDING _____

Proposed Construction Starting Date: _____
Proposed Completion Date: _____

I understand it is applicant's responsibility to call IOWA ONE-CALL (1-800-292-8989) for location of buried cable.

I understand this permit is valid for one (1) year after date of issuance and that construction must commence prior to one (1) year from issuance.

I understand this permit if only valid for the construction herein applied for and shown on the attached layout drawing.

A drawing of the proposed plans which include dimensions of lot with location of all buildings now on lot and planned improvements giving location with reference to lot lines, streets and to each other is attached to this application. Water line and sewer line easements are shown.

This application, plans, and specifications are true and contain a correct description of the proposed building, lot and work to be done, and use to which building or lot is to be used.

I understand this application and any permit that may be granted in response thereto are subject to all laws of the state of Iowa and all ordinances of the City of Walker, Iowa, that may have a bearing on same.

Date of Application: _____
Signature of Applicant

-----FOR CITY USE ONLY-----

Date Received by Zoning Administrator: _____ Fee Paid: _____

Date Application Approved by Zoning Administrator: _____

Conditions of Approval: _____

PERMIT NO.: _____

Date Application Denied by Zoning Administrator: _____

Reason for Denial: _____

Signature of Zoning Administrator

PETITION FOR BOARD OF ADJUSTMENT VARIANCE RECEIVED WITH SURVEY AND WRITTEN JUSTICIATION FOR CRITERIA: _____

FINDINGS OF BOARD OF ADJUSTMENT:
VARIANCE APPROVED: _____ VARIANCE DENIED: _____
DATE PETITIONER NOTIFIED IF DENIED: _____
DATE PERMIT APPROVED BY BOARD OF ADJUSTMENT: _____
DATE PERMIT ISSUED: _____

Chairman, Board of Adjustment

