



BUILDING PERMIT APPLICATION

913 S Dubuque St, Suite 204
Iowa City, IA 52240
Phone: (319) 356-6085
Fax: (319) 356-6084

STAFF USE ONLY
Received by: _____
Permit #: _____

Job Site Address _____

Lot # & Subdivision _____ **Parcel #** _____

Applicant _____ **Phone** _____

Address _____ **City/St/Zip** _____

Owner _____ **Phone** _____

Address _____ **City/St/Zip** _____

General _____ **Phone** _____

Address _____ **City/St/Zip** _____

Subcontractors

Mechanical _____ **Phone** _____

Electrician _____ **Phone** _____

Plumber _____ **Phone** _____

Type of Construction (check one box) New Alteration Addition Repair/Replace Demolition

Project Description (include dimensions) _____

Total Valuation of Project \$ _____
(Excluding cost of land)

Are the lot pins located and marked? No Yes **Are the corners of the structure staked on the lot?** No Yes

Health Department Information

Will this contain a business or commercial kitchen? No, Yes - Describe _____

Total number of bedrooms added (if project is residential) _____ Will there be any new plumbing or changes to the existing plumbing? No, Yes – Describe _____

The proposed construction shall be properly marked or staked on the property at the time of this application. The undersigned applicant shall call for all inspections and be responsible for this project until final approval by Johnson County. The undersigned applicant also agrees to comply with all County ordinances, State and Federal laws regulating building construction and certifies under oath and penalties of perjury that the foregoing information is true and correct:

Applicant's Signature _____

Email _____