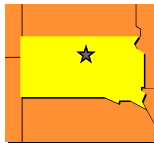


Edmunds County

Application for Building Permit



Edmunds County Planning & Zoning Commission • PO Box 247 • Ipswich, SD 57451
 Phone: (605) 426-6841 • Fax: (605) 426-6164 • Zoning.edco@midconnetwork.com

PROPERTY OWNER

Name _____

Address _____

City, State & Zip _____

LEGAL DESCRIPTION Structure is to be located on/at:

ZONING DISTRICT: _____

SETBACK REQUIREMENTS

Front Yard: _____ Side Yard: _____

Back Yard: _____ Variance Needed: YES NO

BUILDING / CONSTRUCTION INFORMATION

CIRCLE ONE: NEW BUILDING ADDITION ALTERATION REPAIR

MOVE REMOVE/DESTROY

TYPE OF CONSTRUCTION: FRAME STEEL POLE MOBILE HOME

Additional Construction Information: _____

DWELLING / HOUSE

Size: _____ Stories: _____ Type: _____

Bedrooms: _____ Baths: _____ # of Fireplace(s): _____

Basement: Finished _____ Unfinished _____

Foundation: _____ Sewer System: _____

Heating System: _____ Central Air: YES NO

GARAGE

Attached / Detached: _____

Size: _____ Finish: _____

OTHER BUILDING(S)

Size: _____ Height: _____ Floor: _____

Utilities: _____ Heat: _____

OFFICE USE ONLY

APPLICATION DATE _____

PERMIT FEE \$ _____

RECEIPT # _____

TOWNSHIP/TOWN _____

SCHOOL DISTRICT _____

PERMIT # _____

START DATE: _____

COMPLETION DATE: _____

CONTRACTOR:

IF BUILDING IS MOVED

TO: _____

FROM: _____

ESTIMATED COST OF PROJECT

\$ _____

BUILDING PERMIT FEES

(Based on estimated cost of construction)

0-\$10,000: \$15 \$10,001-\$100,000: \$30

\$100,001-\$500,000: \$75 \$500,001 & up: \$150

**PLEASE MAKE CHECKS PAYABLE TO
 EDMUNDS COUNTY TREASURER**

OWNER'S SIGNATURE

I have read the Building Permit Disclaimer and understand and will adhere to the setback requirements for this particular zoning district. I also understand the penalty for failure to adhere to these setback requirements, as outlined in Edmunds County Zoning Ordinance Section 2201. I agree to conform to all applicable laws and conditions stated.

Owner's Signature _____

Date _____

Approved by:

Date: _____