

432-498-4241

DEVELOPMENT SERVICES

1010 E 8th ST. STE 114

DEVELOPMENT STRUCTURE PERMIT

		Permit Number				
1.	<u>APPLICANT</u>					
	Applicant's Name:	Phone				
	Applicant's Name: O	City	State	Zip		
	Email Address:					
	Owner's Name:	Phone				
2.	LOCATION					
	Subdivision:					
	Subdivision:		_Acreage/Lot	t Size		
	Property Address: 0	City	_State	Zip		
3.	<u>RESIDENTIAL</u>					
	\Box Manufactured Home \Box Single Family \Box M	Multi Family/# of	units	□ Other		
	Estimated Cost					
4. <u>COMMERCIAL</u>						
	□ Industrial/Manufacturing □ Business/Office □ Retail/Wholesale □ Other					
Estimated Cost Square Foot of Living Area Square Foot of Structure						
5.	5. <u>SEWAGE TREATMENT</u>					
	□ New Septic □ Existing Legal Septic □ Other					
6.	5. WATER SYSTEM					
	Private Well Utility District Other					
Sig	Signature Date					
	TO BE FILLED OUT BY COUNTY OFFICIAL					
	Inspector will request proof of permit at job site.					
Permit is valid for 6 months						
	Date Issued	Precinct Numb		2 3 4		
	Site/Development Plan	Flood Zone Elevation Certificate Y N				
	Drive Approach Permit Y N	HUB		BFE		
	Septic Permit # ECUD Permit #	Inspector Permit Tech		District 1 2 3		
	Comments	Date Finalized				

Please see next page	for requirements	before submitting
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Requirements for Development Structure Permit

□ Valid Address

 \Box Site Plan

Residential – Location of structure, septic, and water well within property lines with dimensions from each other See example below

 \Box Commercial – Professional Design

 \Box Septic Permit Number

ECUD Permit Number - Contact ECUD (432) 381-5525 when connecting water service to ECUD

□ Flood Zone – Elevation certificate required

Example Residential Site Plan

