

CITY OF MANCHESTER, IOWA

APPLICATION FOR BUILDING PERMIT

CITY OF MANCHESTER, IA | 208 E Main Street | Manchester, Iowa 52057

Ph 563.927.1112 | Mobile: 563-920-0867 | theims@manchester-ia.org

JOB ADDRESS: _____ Residential Commercial Industrial

PROPERTY OWNER: _____
 (Name) (Address) (Phone)

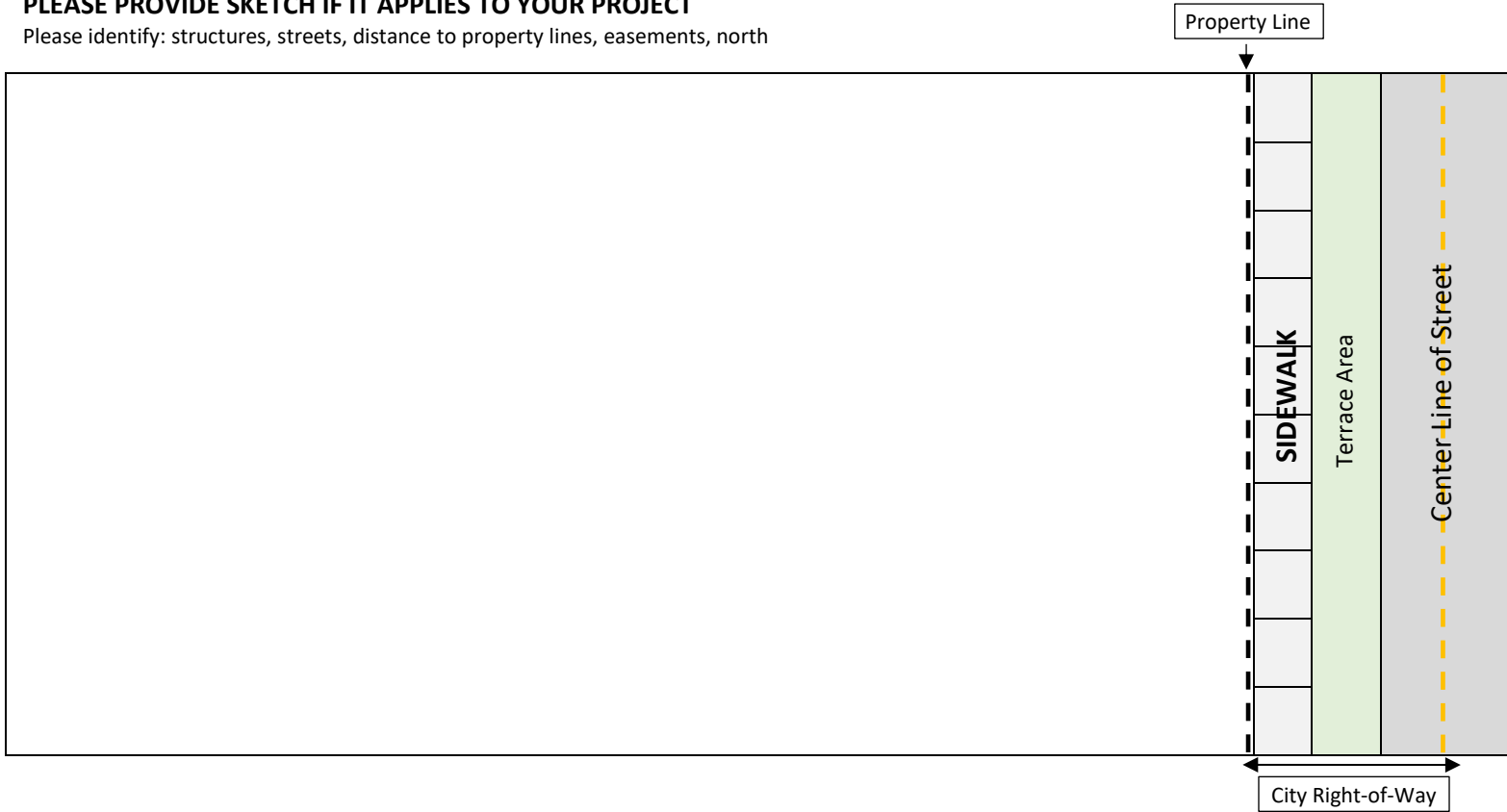
APPLICANT TO COMPLETE	CITY OFFICE TO COMPLETE
<p>PROJECT START DATE: _____</p> <p>ESTIMATED COST OF PROJECT: \$ _____</p> <p>APPLICANT IS: <input type="checkbox"/> Owner <input type="checkbox"/> Contractor</p> <p>WHO IS DOING THE WORK: <input type="checkbox"/> Owner <input type="checkbox"/> Contractor</p> <p style="text-align: center;">ALL CONTRACTORS/ELECTRICIANS/PLUMBERS MUST BE REGISTERED ANNUALLY WITH THE CITY OF MANCHESTER.</p> <p>CONTRACTOR: _____</p> <p>ELECTRICIAN: _____</p> <p>PLUMBER: _____</p>	<p>PROPERTY IS LOCATED IN: <input type="checkbox"/> Flood Plain <input type="checkbox"/> Flood Way <input type="checkbox"/> N/A</p> <p>SPECIAL USE PERMIT REQUESTED: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>VARIANCE/EXCEPTION REQUESTED: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>DISTANCE FROM PROPERTY LINES: Front _____ Rear _____ Right _____ Left _____</p> <p>ZONING CLASSIFICATION: <input type="checkbox"/> RESIDENTIAL 1 2 3 4 5 6 RM <input type="checkbox"/> COMMERCIAL 1 2 3 CBD <input type="checkbox"/> BP <input type="checkbox"/> INDUSTRIAL 1 2 <input type="checkbox"/> PUD <input type="checkbox"/> AV <input type="checkbox"/> FP/FW</p> <p>IOWA ONE CALL NO. _____</p>

TYPE OF WORK TO BE DONE	
ADDITION/REMODEL BASEMENT FINISH	<input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> Side <input type="checkbox"/> 1 st Floor <input type="checkbox"/> 2 nd Floor <input type="checkbox"/> Basement <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> Egress Windows SIZE: _____ X _____ TOTAL SF _____ # of Stories: _____ # of Rooms: _____
DECK/PORCH/STOOP/RAMP	<input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> Side <input type="checkbox"/> Covered <input type="checkbox"/> Open <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing
DEMOLITION	<i>Proof of IA One Call, disconnection for water, sewer/septic, electricity, natural gas, and hazardous materials required.</i>
ELECTRICAL/SOLAR PANELS	<input type="checkbox"/> New Wiring <input type="checkbox"/> Conduit <input type="checkbox"/> Update Panel (new amp): _____ <input type="checkbox"/> Solar Panel Size: _____ X _____
EXCAVATION/ROW	<input type="checkbox"/> Alley <input type="checkbox"/> Easement/Terrace <input type="checkbox"/> Street <input type="checkbox"/> Curb Cut/Driveway Approach <input type="checkbox"/> Drainageway <input type="checkbox"/> Fiber/Cable <input type="checkbox"/> Landscape <input type="checkbox"/> Mailbox <input type="checkbox"/> Underground Utility
FENCE	<input type="checkbox"/> New <input type="checkbox"/> Replacement/Repair Prop Line: <input type="checkbox"/> On <input type="checkbox"/> 3ft Off <input type="checkbox"/> Corner Lot Height: _____ Materials: _____
GARAGE/SHED	<input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> Side <input type="checkbox"/> Attached <input type="checkbox"/> Detached Flooring: _____ SIZE: _____ X _____ TOTAL SF _____ Materials: _____
PLUMBING ONLY	<input type="checkbox"/> New Plumbing <input type="checkbox"/> Replace Pipes/Drains <input type="checkbox"/> Move Plumbing

RESIDE	<input type="checkbox"/> House <input type="checkbox"/> Garage <input type="checkbox"/> Accessory Building <input type="checkbox"/> Tear Off <input type="checkbox"/> Overlay <input type="checkbox"/> Replace Windows <input type="checkbox"/> Soffit/Gutters/Fascia Materials: _____
RESHINGLE	<input type="checkbox"/> House <input type="checkbox"/> Garage <input type="checkbox"/> Accessory Building <input type="checkbox"/> Tear Off <input type="checkbox"/> Overlay (Max of 2 layers when completed) <input type="checkbox"/> Asphalt <input type="checkbox"/> Steel <input type="checkbox"/> Rubber <input type="checkbox"/> Replace Sheathing # of Squares: _____
SIDEWALK REPAIR	<input type="checkbox"/> New concrete <input type="checkbox"/> Lifted <input type="checkbox"/> Ground Number of Panels: _____
SIGN	<input type="checkbox"/> Pylon <input type="checkbox"/> Monument <input type="checkbox"/> Building <input type="checkbox"/> Awning <input type="checkbox"/> Electronic Message Board <input type="checkbox"/> Illuminated Sign Face SF: _____

PLEASE PROVIDE SKETCH IF IT APPLIES TO YOUR PROJECT

Please identify: structures, streets, distance to property lines, easements, north



ACKNOWLEDGEMENT

I acknowledge:

- PERMIT. The entity performing the actual work (owner or contractor), is the one responsible for obtaining a permit.
- REGISTRATION. All contractors/electricians/plumbers must be registered annually with the City of Manchester, and prior to work commencing.
- PLANS. A plan review or inspection may be necessary before a permit can be issued.
- BEGIN WORK. Work may not begin until the permit is issued and paid for in full. Concrete may not be poured until forms have been approved.
- PLAN CHAGES. Any unapproved plan changes will void the permit.
- IOWA ONE CALLS. An Iowa One Call is required prior to any type of excavation or demolition.
- INSPECTIONS. Same-day inspections are not guaranteed. A minimum 48-Hour notice is required.
- ORDINANCES. It is my responsibility to have knowledge of the ordinances governing my project.
(Granting a permit does not presume to give authority to violate or cancel the provision of any other state or local law regulating construction or the performance of construction.)

The information I have provided is true and correct.

Signature of Applicant: _____

Date: _____