RESIDENTIAL BUILDING PERMIT APPLICATION

PLEASE READ: This application must be completely filled out, where applicable, and submitted with the required items listed below and full payment before the Planning Department will accept your Building Permit Application. The Building Permit review process may take a minimum of ten (10) business days before the permit is issued; please plan your construction project accordingly.

I certify that all information contained within this application form and any other information provided by me in relation to this application is true and accurate to the best of my knowledge; I certify that I will comply with all applicable Federal, State and local Laws, Regulations and Ordinances in performing the work for which this permit is intended, up to and including current International Building Codes, as applicable; and, I FURTHER UNDERSTAND THAT SUBMITTAL OF THIS APPLICATION IS NOT AND DOES NOT CONSTITUTE AN APPROVED BUILDING PERMIT.

CHECKLIST OF SUBMITTAL REQUIREMENTS FOR BUILDING PERMIT

<table>
<thead>
<tr>
<th>Requirement</th>
<th>CHECK BOX</th>
</tr>
</thead>
<tbody>
<tr>
<td>Owner Statement</td>
<td>Yes</td>
</tr>
<tr>
<td>Complete Site Plan (Sign and Date)**</td>
<td>N/A</td>
</tr>
<tr>
<td>Detailed Floor Plan (i.e. All rooms labeled including ovens and stoves)</td>
<td>No</td>
</tr>
<tr>
<td>(Sign and Date)</td>
<td></td>
</tr>
<tr>
<td>Copies of all Easements on the subject property. (please attach)</td>
<td></td>
</tr>
<tr>
<td>FEMA Flood Map of Subject Property – current (if applicable)</td>
<td></td>
</tr>
<tr>
<td>On-Site Wastewater Construction Permit or Operating Permit</td>
<td></td>
</tr>
<tr>
<td>DENR Approval for On-site Wastewater Treatment System (if needed)</td>
<td></td>
</tr>
<tr>
<td>Approach Permit** (please attach)</td>
<td></td>
</tr>
<tr>
<td>Completed Application</td>
<td></td>
</tr>
</tbody>
</table>

**Please utilize the area provided on this application or a separate document to produce a legible site plan with the items identified on the Site Plan Drawing Checklist (attached).

**Must be approved by applicable street authority.

Property Address: ____________________________
Lot Size: _______ acre(s) Zoning: ______________

Legal Description: Section: _____ Township: _____ Range: _____

Property Owner Name: _________________________
Property Owner Phone: ________________________

Applicant Name: _____________________________
Address: _____________________________ Phone: _____________________________
City: _________________________ State: _______ Zip: _________________________

Email: _____________________________

*Electrical Contractor: (if applicable)
*Plumbing Contractor: (if applicable)

MAIL TO --> Applicant* _____ Contractor _____ Property Owner _____ Other_____ Pick Up_____  
* DEFAULT RECIPIENT IF NONE ARE CHOSEN.
### TYPE OF CONSTRUCTION

- [ ] New Residence*
- [ ] Finishing Basement*
- [ ] Addition to Residence*
- [ ] Accessory Structure (i.e. garage, shed)
- [ ] Mobile or Manufactured Home*
- [ ] Other: ____________________

For * above, please answer the following:

- # of Bedrooms in Residence:
- # of Bedrooms Being Added:
- Is your Septic Sized appropriately for the number of bedrooms: NO _____ YES _____
- Means of Wastewater Disposal:

### SQUARE FEET

<table>
<thead>
<tr>
<th>Finished Space:</th>
<th>Garage:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unfinished Space:</td>
<td>Deck or Porch:</td>
</tr>
<tr>
<td>Finishing Basement: (new construction)</td>
<td>Agricultural Structure:</td>
</tr>
<tr>
<td>Finishing Basement: (existing dwelling)</td>
<td>Mobile or Man. Home: (Year: _____)</td>
</tr>
</tbody>
</table>

Total Square Footage:

### Setback Distances to Lot Lines (IN FEET)

<table>
<thead>
<tr>
<th>Proposed Structure</th>
<th>Front</th>
<th>Side</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Rear</td>
<td>Side</td>
</tr>
</tbody>
</table>

### ADDITIONAL PROPERTY INFORMATION REQUIRED

Section Line(s) on Property? NO _____ YES _____

Is one or more Vacated or Relocated? _____ NO _____ YES _____

*If yes, enter Document Number or date of hearing: __________________________

Is the property platted? NO _____ *YES _____

*If yes, the most current plat # is: __________________________

Is the property a Developmental Lot per the Zoning Ordinance? NO _____ YES _____

### AREA OF DISTURBANCE

Type of Work (Check all that Apply): Grading_____ Excavating_____ Stockpiling _____

Excavation and/or Grading: Length ______ Width______ Depth _______ = TOTAL: _______sq.ft. _______cu.ft.

Stockpile: Length_______ Width _______ Height______ # of Stockpiles _______ = TOTAL: sq.ft.

Total disturbed area: __________ sq.ft. __________ Acres
Site Plan Drawing Checklist

The location of the following items shall be included on the site plan drawing, to be submitted with the Building Permit Application:

<table>
<thead>
<tr>
<th>CHECK</th>
<th>CHECK</th>
</tr>
</thead>
<tbody>
<tr>
<td>Actual property lines (lot boundaries)</td>
<td>Access/Approach (Driveway)</td>
</tr>
<tr>
<td>Adjoining right-of-way(s) and road names</td>
<td>All existing structures and setback distances to property lines</td>
</tr>
<tr>
<td>Proposed structure, dimensions and setback distances from property lines</td>
<td>All existing easements (i.e. drainage, access, utility, etc.)</td>
</tr>
<tr>
<td>Special Flood Hazard Area(s) [if existent]</td>
<td>Section Line(s)</td>
</tr>
<tr>
<td>Proposed areas of dirt work</td>
<td>Existing and/or proposed utility lines</td>
</tr>
<tr>
<td>Open water areas (i.e. streams, creeks, irrigation ditches, natural drainage ways, etc.)</td>
<td>Erosion control measures and type (if in MS4 Boundary)</td>
</tr>
<tr>
<td>Scale of drawing &amp; North Arrow</td>
<td>Existing Variances (include permit numbers)</td>
</tr>
</tbody>
</table>

Additional Requirements for Properties Containing an On-Site Wastewater Treatment System

- [ ] Existing or proposed on-site wastewater treatment system and setback distances to proposed structure(s)
- [ ] Well (proposed or existing)

Example:
Site Plan Drawing (drawn to scale):
In lieu of drawing a Site Plan, I have attached additional drawings. __________

INITIALS

NOTE: Additional documents must be initialed and dated by applicant.

(EXAMPLE OF SITE PLAN AND A CHECKLIST OF NEEDED ITEMS ARE LOCATED ON PAGE 3)
OWNER STATEMENT

An Owner Statement is to be completed by all Owners of Record and submitted with a Building Permit application when someone other than the Owner(s) of Record is/are applying for a Building Permit. When there is more than one Owner of Record, more than one Owner Statement is required.

I acknowledge that a Building Permit application has been submitted for improvements to my property in Pennington County, South Dakota, and I have reviewed the application packet prior to submittal and give permission for a Building Permit to be applied for and issued for such improvements.

_____ I verify that the proposed construction is: ______________________________________.

INITIAL

_____ I verify that I am the Owner of Record of the property described below:

INITIAL

Tax ID: ___________________ and Parcel ID: ___________________
or
Legally Described as:

___________________________________________________________

___________________________________________________________

___________________________________________________________, T___, R___, Section ___

___________________________________________________________

OWNER NAME (print) ____________________  OWNER SIGNATURE ____________________

Subscribed and sworn before me at ____________________________, ________________________, CITY/TOWN STATE this _____ day of ________________________, 20____.

Notary Public: ______________________

My Commission Expires: _________________