



# POST AT JOBSITE

# BUILDING PERMIT

## TOWN OF WEST YELLOWSTONE

Applicant to complete numbered spaces only

PERMIT NO.

**1** Job Address \_\_\_\_\_

**2** Legal Desc. Lot No. \_\_\_\_\_ Blk \_\_\_\_\_ Subdivision \_\_\_\_\_

**3** Owner \_\_\_\_\_ Mail. Address \_\_\_\_\_

E-mail \_\_\_\_\_ Phone \_\_\_\_\_

**4** Contractor \_\_\_\_\_ License \_\_\_\_\_ Mail. Address \_\_\_\_\_

E-mail \_\_\_\_\_ Phone \_\_\_\_\_

**5** Architect/Designer \_\_\_\_\_ Mail. Address \_\_\_\_\_ Phone \_\_\_\_\_

**6** Engineer \_\_\_\_\_ Mail. Address \_\_\_\_\_ Phone \_\_\_\_\_

**7** Building Set Backs Front \_\_\_\_\_ Side \_\_\_\_\_ Side \_\_\_\_\_ Rear \_\_\_\_\_ Bldg. Dimensions Length \_\_\_\_\_ Width \_\_\_\_\_ Height \_\_\_\_\_

**8** Site Plan Yes No Basement Yes No No. Bedrooms \_\_\_\_\_

**Mechanical**

- Furnace
- Bath Vents
- Air Cond.
- Range Hood if ducted

**9** Class of Work New Addition Alteration Repair

**10** Use of Building Existing use \_\_\_\_\_ Proposed Use \_\_\_\_\_

**11** Describe work \_\_\_\_\_

**12** Valuation of Work \$ \_\_\_\_\_

**Remarks and Special Conditions** \_\_\_\_\_

\_\_\_\_\_

**Easements** \_\_\_\_\_

**Application accepted by** \_\_\_\_\_ **Plans approved by** \_\_\_\_\_

**Issued by** \_\_\_\_\_ **Zoning Permit Approval** \_\_\_\_\_

**Fire Alarm** \_\_\_\_\_ **Fire Sprinklers Required**  Yes  No

**Off Street Parking Spaces** Required \_\_\_\_\_ Furnished \_\_\_\_\_ **Type of Construction** \_\_\_\_\_

**Garage** Attached  Double  **Size of Building** **SQ. FT.** \_\_\_\_\_ **No. of Stories** \_\_\_\_\_ **Occupancy Group** \_\_\_\_\_ **Max. Occupancy** \_\_\_\_\_

SQ. FT. Detached  Single  **SQ. FT.** \_\_\_\_\_ **No. of Dwelling Units** \_\_\_\_\_ **Zoning** \_\_\_\_\_

**FEE SCHEDULE**

Permit \_\_\_\_\_

Sewer \_\_\_\_\_

Water Meter \_\_\_\_\_

Water \_\_\_\_\_

Driveway Bond \_\_\_\_\_

Other \_\_\_\_\_

**TOTAL** \_\_\_\_\_

**AGREEMENT**

Separate permits are required for Electrical, Plumbing, Heating, Ventilating or Air Conditioning. This permit becomes null and void if work or construction authorized is not commenced within 180 days, or if work is suspended or abandoned for a period of 180 days at any time after work is commenced. The undersigned agrees that the proposed work shall be done in accordance with the plans and specifications submitted and in conformance with the provisions of the Town of West Yellowstone Zoning pertaining to building construction.

**ADDENDUM TO THE PERMIT**

Compliance with the requirements of the state building code for the physical accessibility to persons with disabilities does not necessarily guarantee compliance with the Americans with Disabilities Act of 1990, the Rehabilitations Act of 1973, the Fair Housing Amendments Act of 1988, Title 49, chapter 2, commonly known as the Montana Human Rights Act, or other similar federal, state or local laws that mandate accessibility to commercial construction of multifamily housing.

Signature - Applicant \_\_\_\_\_ Date \_\_\_\_\_ Signature - Applicant \_\_\_\_\_ Date \_\_\_\_\_