Residential Building Permit Application

Casselton NORTH DAKOTA

Please email completed applications to: midwestinspectionservicesnd@gmail.com
Incomplete applications will cause delays in the routing/review and permitting process.

Project Title*:	Office use only:
Address:	
Project Value:	

Project Description:

Owner:	Contact Person:
	Phone: Fax:
Address:	E-mail:

Designer:	Contact Person:
	Phone: Fax:
Address:	E-mail:

General Contractor:	Contact Person:
	Phone: Fax:
Address:	E-mail:
ND Contractor License No.	

Foundation Contractor:	Mechanical Contractor:
Phone:	Phone:
E-Mail:	E-Mail:
ND Contractor License No.	ND Contractor License No.

Excavator:	Yard Grading Contractor:
Phone:	Phone:

Plumbing Contractor:	Electrical Contractor:
Phone:	Phone:

Complete back side.

TYPE OF IMPROVEMENT:
☐ New Construction ☐ Addition ☐ Remodel ☐ Demolition ☐ Move ☐ Repair ☐ Miscellaneous ☐ Temporary

PERMIT FOR:
☐ Single Family Dwelling ☐ Two Family Dwelling (Separate Permit for each Unit) ☐ Townhouse (Units)
☐ Accessory Building ☐ Deck ☐ Residing ☐ Lower Level Finish
☐ Other (Please Explain:)

BUILDING/STRUCTURE SIZE:
Width   Ft.   Depth   Ft.   Height   Ft.   No. of Stories   Basement Finished ☐ Yes ☐ No
Basement Floor Area   SF   Number of Bedrooms
Main Floor Area   SF   Number of Bedrooms
Second Floor Area   SF   Number of Bedrooms
Third Floor Area   SF   Number of Bedrooms
Garage Floor Area   SF

# of Units	HVAC EQUIPMENT	TON'S/BTU's

BUILDING LOCATION ON SITE:
Property Zoning Designation   Property Area   SF
North Property Setback Distance   Ft. ☐ Front ☐ Side ☐ Rear ☐ Adjacent to Public Way
East Property Setback Distance   Ft. ☐ Front ☐ Side ☐ Rear ☐ Adjacent to Public Way
South Property Setback Distance   Ft. ☐ Front ☐ Side ☐ Rear ☐ Adjacent to Public Way
West Property Setback Distance   Ft. ☐ Front ☐ Side ☐ Rear ☐ Adjacent to Public Way

REQUIREMENTS FOR CONSTRUCTION IN FLOODPLAIN:
Is the Building Located in the Special Floodplain Hazard area? ☐ Yes ☐ No (If yes complete the following)
Base Flood Elevation   Ft.   Flood Protection Elevation   Ft.   Letter of Map Revision Issued ☐ Yes ☐ No
Acknowledgement Form Submitted ☐ Yes ☐ No

For Office Use Only

Septic Permit Required:
☐ Yes ☐ No

Planning and Zoning Approval:
P.U.D. ☐ Yes ☐ No   Conditional Use ☐ Yes ☐ No   Overlay District ☐ Yes ☐ No
Date Approved

I hereby acknowledge that this application is not a Building Permit, nor does it authorize the start of construction.

_____
Signature of Applicant   Date