



Application for Plan Examination and Building Permit

CITY OF DEVILS LAKE

PO Box 1048
 Devils Lake, ND 58301-1048
 (701)662-7600, Extension 3

Building Permit No. _____

Important - Applicant to complete all items in sections: I, II, III, IV, and VIII.

I. Location of Building	AT (LOCATION) _____	I.D. NO. _____
	(No.) (Street)	
	OWNER'S NAME _____	
	SUBDIVISION _____	LOT _____ BLOCK _____

II. Type and Cost of Building - All applicants complete parts A-D

<p>A. TYPE OF IMPROVEMENT</p> <p>1. <input type="checkbox"/> New Building</p> <p>2. <input type="checkbox"/> Addition</p> <p>3. <input type="checkbox"/> Repair, Replacement</p> <p>4. <input type="checkbox"/> Wrecking</p> <p>5. <input type="checkbox"/> Relocation</p> <p>6. <input type="checkbox"/> Moving</p> <p>7. <input type="checkbox"/> Foundation only</p>	<p>D. PROPOSED USE - For "Wrecking" most recent use</p> <table style="width:100%;"> <tr> <td style="width:50%; vertical-align: top;"> <p>Residential</p> <p>13. <input type="checkbox"/> One Family</p> <p>14. <input type="checkbox"/> Two or more family - Enter number of units _____</p> <p>15. <input type="checkbox"/> Transient hotel, motel, or dormitory - Enter number of units _____</p> <p>16. <input type="checkbox"/> Garage</p> <p>17. <input type="checkbox"/> Carport</p> <p>18. <input type="checkbox"/> Other - specify _____</p> </td> <td style="width:50%; vertical-align: top;"> <p>Non-Residential</p> <p>19. <input type="checkbox"/> Amusement, recreational</p> <p>20. <input type="checkbox"/> Church, other religious</p> <p>21. <input type="checkbox"/> Industrial</p> <p>22. <input type="checkbox"/> Parking garage</p> <p>23. <input type="checkbox"/> Service station, repair garage</p> <p>24. <input type="checkbox"/> Hospital, Institutional</p> <p>25. <input type="checkbox"/> Office, bank, professional</p> <p>26. <input type="checkbox"/> Public utility</p> <p>27. <input type="checkbox"/> School, library, other educational</p> <p>28. <input type="checkbox"/> Stores, mercantile</p> <p>29. <input type="checkbox"/> Tanks, towers</p> <p>30. <input type="checkbox"/> Other - specify _____</p> </td> </tr> </table>	<p>Residential</p> <p>13. <input type="checkbox"/> One Family</p> <p>14. <input type="checkbox"/> Two or more family - Enter number of units _____</p> <p>15. <input type="checkbox"/> Transient hotel, motel, or dormitory - Enter number of units _____</p> <p>16. <input type="checkbox"/> Garage</p> <p>17. <input type="checkbox"/> Carport</p> <p>18. <input type="checkbox"/> Other - specify _____</p>	<p>Non-Residential</p> <p>19. <input type="checkbox"/> Amusement, recreational</p> <p>20. <input type="checkbox"/> Church, other religious</p> <p>21. <input type="checkbox"/> Industrial</p> <p>22. <input type="checkbox"/> Parking garage</p> <p>23. <input type="checkbox"/> Service station, repair garage</p> <p>24. <input type="checkbox"/> Hospital, Institutional</p> <p>25. <input type="checkbox"/> Office, bank, professional</p> <p>26. <input type="checkbox"/> Public utility</p> <p>27. <input type="checkbox"/> School, library, other educational</p> <p>28. <input type="checkbox"/> Stores, mercantile</p> <p>29. <input type="checkbox"/> Tanks, towers</p> <p>30. <input type="checkbox"/> Other - specify _____</p>
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<p>B. OWNERSHIP</p> <p>8. <input type="checkbox"/> Private (individual, corporation, non-profit institution, etc.)</p> <p>9. <input type="checkbox"/> Public (Federal, State or local government)</p>			

<p>C. COST</p> <p>10. Cost of Building Materials \$ _____</p> <p>11. Labor (general) \$ _____</p> <p style="margin-left: 20px;">a. Electrical \$ _____</p> <p style="margin-left: 20px;">b. Plumbing \$ _____</p> <p style="margin-left: 20px;">c. Heating, air conditioning \$ _____</p> <p style="margin-left: 20px;">d. Other (elevator, etc.) \$ _____</p> <p>12. Total Cost of Improvement \$ _____</p>	<p>Describe proposed use of buildings, e.g. food processing plant, machine shop, laundry building at hospital, elementary school, college, parochial school, parking garage for department store, rental office building, office building at industrial plant. If use of existing building is being changed, enter proposed use.</p>
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Permit fees for new construction will be based on construction costs as determined by Building Valuation Data Tables

III. Selected Characteristics of Building - For new building and additions, complete Parts E-J; for wrecking, complete only Part H, for all others skip to IV.

<p>E. PRINCIPLE TYPE OF FRAME</p> <p>31. <input type="checkbox"/> Masonry (wall bearing)</p> <p>32. <input type="checkbox"/> Wood Frame</p> <p>33. <input type="checkbox"/> Structural steel</p> <p>34. <input type="checkbox"/> Reinforced concrete</p> <p>35. <input type="checkbox"/> Other - specify _____</p>	<p>G. TYPE OF MECHANICAL</p> <p>Will there be central air conditioning?</p> <p>41. <input type="checkbox"/> Yes 42. <input type="checkbox"/> NO</p> <p>Will there be an elevator?</p> <p>43. <input type="checkbox"/> Yes 44. <input type="checkbox"/> NO</p>	<p>I. NUMBER OF OFF-STREET PARKING SPACES</p> <p>48. Enclosed _____</p> <p>49. Outdoors _____</p> <p>J. RESIDENTIAL BUILDING ONLY</p> <p>50. Number of bedrooms _____</p> <p>51. Number of bathrooms: Full _____ Partial _____</p>
<p>F. PRINCIPLE TYPE OF HEATING FUEL</p> <p>36. <input type="checkbox"/> Gas</p> <p>37. <input type="checkbox"/> Oil</p> <p>38. <input type="checkbox"/> Electricity</p> <p>39. <input type="checkbox"/> Coal</p> <p>40. <input type="checkbox"/> Other - specify _____</p>	<p>H. DIMENSIONS</p> <p>45. Number of stories _____</p> <p>46. Total square feet of floor area, all floors, based on exterior dimensions _____</p> <p>47. Total land area, sq. ft _____</p>	

Notes and data - (For department use)

TYPE: _____ USE: _____
_____ X _____ _____ SQ. FT.

FOUNDATION TYPE: _____

INSPECTIONS REQUIRED:

- FOOTING
- FOUNDATION
- PRE-BACK FILL INSPECTION
- BACKFILL
- INTERMEDIATE
- FRAMING
- FINAL
- SUB FLOOR PLUMBING
- ABOVE GROUND PLUMBING
- OTHER

NOTES:

NOTICE

Federal Laws may require this construction project to conform with the American with Disabilities Act Accessibility Guidelines for Buildings and Facilities.

NDCC SECTION 54-21.3-04.2

IV. Identification - To be completed by all applicants				
Name		Mailing Address - number, street, city, state	Zip Code	Tel. No.
1. Owner or Lessee				
2. Architect or Engineer				
3. Contractor				
<p>The permit applicant/holder/owner at all times remains responsible for ensuring that the construction, plans, and specifications comply with all requirements of all City Codes and other applicable requirements. Through application for and acceptance of this building permit the permit applicant/holder/owner understands and agrees that the City will conduct periodic observations of construction, but that such observation or review of plans and/or construction does not constitute either explicit or implied certification that the plans and/or construction comply with City Codes or any other applicable requirements.</p>				
Signature of Applicant: X			Mailing Address :	
Application Date:			Telephone No. :	

V. Licensed Contractors	
General	_____
Plumbing	_____
Electrical	_____
Heating & Air Conditioning	_____
Other	_____

VI. Validation	
Building Permit Number	_____
Building Permit Issued	_____ 20 _____
Building Permit Fee \$	_____
	Approved By:

	Title

